

Tablet splitting generally ok; some exceptions

A 2022 review of tablet splitting¹ notes "With the exception of sustained-release tablets, which should not be split, and excepting those older people who may struggle to split tablets based on physical limitations; there is little evidence to support tablet-splitting concerns."

Some tablets that can be split are chlorthalidone 25 mg to get a 12.5 mg tablet (fewer electrolyte disturbance and good BP drop), finasteride 5 mg into four x 1.25 mg to prevent male baldness, empagliflozin for heart failure with preserved ejection fraction without diabetes and CKD – cut the 25 mg in half, and rosuvastatin 40 mg tablet into halves or quarters for patients who are paying for it.

Patients usually don't mind, and the outcomes are good and measurable. Middle-sized tablets can be split with their fingers, while small and hard tablets need the pill cutter device.

Reference:

1. Concerns regarding tablet splitting: a systematic review BJGP open (2022)

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