

# Chapter 6: Transplant Medication

## General Information

Your body's natural response is to fight off your new kidney. This is called rejection. To try to keep your body from rejecting your new kidney, you need to take anti-rejection medications, also called immunosuppression, for as long as your kidney is working.

Your coordinator and nurses will start to teach you about your medications while you are in the hospital. You will continue to learn about your medications at post-transplant clinic appointments.

If you have any questions about your medications, ask a transplant coordinator, nephrologist or surgeon.

When you are ready to go home, a coordinator will help you set up your medications in a pill box until your first clinic appointment.

The nurses at the Transplant Clinic will help you with your medications until you can set them on your own. A family member or friend can learn and help you at home.

### Important

- Always check with your nephrologist *before* you take any other medications. This includes prescriptions from other doctors, over-the-counter products, vitamins, natural products or traditional medications or remedies.

Some medications cannot be taken with your transplant medications. Taking them could harm the transplanted kidney.

- Do not change any of your medications on your own. If you think you are having side effects from a medication, call the Transplant Clinic.

# Transplant Medications and Possible Side Effects

You will take a combination of anti-rejection medications.

Some of these are given to you through your IV right after surgery and some are pills you will continue to take once you go home.

Most medications have side effects. Some common side effects are listed under each medication.

## ❑ Prednisone

- Prednisone is a steroid that is used as an anti-rejection medication.
- You will receive the first 2 doses through your IV line. After that, you will then receive your dose in a pill.
- Your coordinator or doctor will tell you how long you need to take prednisone. If you are taking it for a long time, you will follow a taper schedule. A coordinator will explain your taper to you.
- Possible side effects are:
  - increased appetite and weight gain
  - indigestion
  - mood swings
  - increased blood pressure, cholesterol and glucose
  - swelling of the face, feet or ankles.

## ❑ Tacrolimus (Envarsus® or Prograf®)

- Tacrolimus is an anti-rejection medication.
- Tacrolimus will be started while you are in the hospital.
- You will have levels checked to make sure the dose is right.
- Possible side effects are:
  - nausea or vomiting
  - tremors (shaking)
  - hair loss
  - high blood pressure
  - increased blood glucose levels.

- Mycophenolate mofetil (Cellcept® or Myfortic®)**
  - Mycophenolate is an anti-rejection medication.
  - Mycophenolate will be started while you are in the hospital.
  - Possible side effects are:
    - low white blood cell count and hemoglobin
    - nausea, vomiting and diarrhea.
- Thymoglobulin**
  - Thymoglobulin is an anti-rejection medication. You will receive 4 or 5 doses through your IV line.
  - Possible side effects are:
    - flu-like symptoms
    - low white blood cell count and platelet count
    - allergic reaction.
- Basilixumab (Simulect®)**
  - Basilixumab is an anti-rejection medication. You will receive 2 doses through your IV line.
  - There are usually no side effects.

## Preventive Medications

You will take several preventive medications after transplant. You will take these medications for 2 to 6 months. You may take all or some of the these:

- antibiotic to help prevent some common infections caused by bacteria
- antifungal to help prevent a common infection caused by fungi (yeast)
- antiviral to help protect against a common infection caused by a virus
- medication to help decrease stomach acid and prevent ulcers
- medications to help prevent constipation.

## Other Medications

You may need to take medications for other health issues. For example, you may need to take medication to control your blood pressure, cholesterol or blood glucose.

A kidney transplant doesn't cure those health issues so you will need to take medications to control them.