



London Health Sciences Centre

Multi-Organ Transplant Program

**University Hospital
Patient Medication Information
Pharmacy Services 519-663-3172**

Brand Name: Prograf®
Common Names: tacrolimus (also known as **FK-506**)

What is it?

Tacrolimus is a very potent immunosuppressive drug, which helps prevent you from rejecting your transplanted organ(s). You will probably have to take it for the rest of your life. You may be taking other medications along with tacrolimus to prevent rejection such as prednisone, mycophenolate, or sirolimus. Tacrolimus may also be used to treat rejection.

How should it be taken?

Tacrolimus is usually taken twice a day, every 12 hours. While in the hospital you will take it at 8AM and 8PM. When you go home, you can take it at whatever time is most convenient for you, as long as it is **every 12 hours** (eg. 9AM and 9PM or 7AM and 7PM, etc.) It may be taken with food or on an empty stomach, but you should try to be consistent (eg. always with food or always on an empty stomach).

DO NOT take tacrolimus with grapefruit or grapefruit juice as this may cause your blood levels of tacrolimus to increase. Orange juice has no effect on tacrolimus blood levels.

Dose changes

For the first few months after your transplant, your dose of tacrolimus will change often. Dose changes are based on the amount of tacrolimus in your blood. The dose will vary among different people and different types of transplants. Your doctor will tell you what dose you should take.

When you leave the hospital you will continue to have your tacrolimus blood level checked periodically. When you come to the clinic for blood tests, **DO NOT** take your tacrolimus dose that morning. Bring it with you and **take it after** your blood is drawn. Your doctor will tell you if you need to change your dose after he has seen the results of your blood tests.

If you miss a dose

Take it as soon as you remember if this is within 6 hours of when you should have taken it. If you remember longer than 6 hours, skip the dose completely and continue with your regular schedule. **NEVER** double the dose. It is very important to remember to take this medication regularly so that it can work its best for you. Missing too many doses can lead to rejection.

If you are sick

If you vomit within ½ hour of taking tacrolimus, you should take it again. If you vomit more than ½ hour after taking your dose of tacrolimus it is not necessary to take another dose. If you have diarrhea for several days or continue to vomit, you should contact your transplant team. They may want to check your tacrolimus blood level.

How should tacrolimus be stored?

Keep your medications away from extremes of temperature (very hot or very cold). Keep tacrolimus at room temperature, away from children.

What are the side effects?

Tacrolimus can cause nausea, stomach discomfort, diarrhea, tremors, headaches, difficulty sleeping, flushing, numbness or tingling (especially around the mouth) and increased sensitivity to touch. Some people may also develop high blood pressure, high potassium in the blood, or slowing of kidney function.

Many of these side effects can also occur when your blood levels are too high, which is why it is important for your transplant team to continue to monitor your blood levels of tacrolimus.

Some people may also develop diabetes and require medication or insulin to treat this.

Other information

Tacrolimus is a very specialized drug and may not be readily available at every pharmacy. Be sure you always have enough on hand so you never run out.

Drug interactions

Many prescription and non-prescription medications can interact with tacrolimus and affect the way it works in your body. It is important to check with your doctor or pharmacist before you take any new medication to make sure it will not affect the amount of tacrolimus in your blood. A list of some common medications that don't mix well with tacrolimus is included below.

It is also recommended that you avoid herbal medicines, as these may also affect tacrolimus blood levels

Drugs used to treat high cholesterol and triglycerides may become more potent when taken with tacrolimus. You should always check with your transplant team before taking these types of medications (eg. atorvastatin, simvastatin, pravastatin, lovastatin, rosuvastatin, fenofibrate etc.).

You should also check with your transplant team before having any vaccinations.

Drugs that may increase tacrolimus blood levels	Drugs that may decrease tacrolimus blood levels	Drugs that may cause additive harm to kidneys
diltiazem verapamil fluconazole itraconazole ketoconazole erythromycin clarithromycin cimetidine estrogen birth control pills grapefruit or its juice	phenytoin phenobarbital carbamazepine primidone rifampin	ibuprofen and other anti-inflammatory drugs Aspirin