



Edinburgh Transplant Centre Royal Infirmary of Edinburgh

Medication Reminder Booklet



The Green Book

Name:
Date of transplant:
Allergies:
Transcribed by: Date:
Checked by: Date:
Useful numbers
 RIE Switchboard: 0131 242 1000 Ward 206 Transplant: 0131 242 2068
For pharmacists, phone switchboard and ask for the bleep number as required:
 Liver Bleep 5132

Renal/pancreas/islet cells Bleep 2294

Table of Contents

Personal information and useful numbers	2
Immunosuppressant dosage chart	4-7
Medication record chart	8-15
Common immunosuppressants	16-17
Other transplant-related medicines	18
Pregnancy after transplantation	19
Tips to help you remember to take your medicines correctly	20-22
General information about taking your medication	22-23

The purpose of this booklet is to help you keep track of the medication you are taking.

It is entirely up to you how you use it.

It can be helpful for the doctor to see your book when you come to clinic or hospital.

Drug brand:

Drug name:

Date	10am	10pm	Initials

Tacrolimus/ciclosporin/sirolimus: on clinic mornings, only. Take your dose once your blood sample has been taken.

Drug brand:

Drug name:

Date	10am	10pm	Initials

Tacrolimus/ciclosporin/sirolimus: on clinic mornings, only. Take your dose once your blood sample has been taken.

Drug brand:

Drug name:

Date	10am	10pm	Initials

Tacrolimus/ciclosporin/sirolimus: on clinic mornings, only. Take your dose once your blood sample has been taken.

Drug brand:

Drug name:

Date	10am	10pm	Initials

Tacrolimus/ciclosporin/sirolimus: on clinic mornings, only. take your dose once your blood sample has been taken.

Medicine	Dose	8am	10 am	12 pm

2pm	6pm	10 pm	Indication/comments	Stop date	Initial

Medicine	Dose	8am	10am	12 pm

2pm	6pm	10 pm	Indication/comments	Stop date	Initial

Medicine	Dose	8am	10am	12 pm

2pm	6pm	10 pm	Indication/comments	Stop date	Initial

Medicine	Dose	8am	10am	12 pm

2pm	6pm	10 pm	Indication/comments	Stop date	Initial

Common Transplant Medicines

This is a list of the medicines commonly used in the post-transplant period. Your doctors will decide on the best combination for you. You will only be on some of the medicines from this list, not all.

Anti-rejection medicines (immunosuppressants)

Tacrolimus

 \bigcirc

Twice daily preparations (brands: Adoport/Prograf/Modigraf)
Once daily preparations (brands: Advagraf/Envarsus/Dailiport)

- Should ideally be taken 2 hours after food (empty stomach)
- Always take the same brand as recommended by specialists
- Avoid grapefruit and grapefruit juice
- Keep in the original packaging if possible
- On clinic mornings, only take dose after bloods have been taken.

Ciclosporin



Should be prescribed by brand as Neoral

- Taken twice daily
- Avoid grapefruit and grapefruit juice
- Keep in the original packaging if possible
- On clinic mornings, only take dose after bloods have been taken.

Sirolimus

- Taken once daily at the same time each day
- Always take with food or always take on an empty stomach
 - be consistent in relation to food intake
- Avoid grapefruit and grapefruit juice
- On clinic mornings, only take dose after bloods have been taken.

Azathioprine

- Taken **once daily** at the same time each day
- Should ideally be taken with food.

Mycophenolate Mofetil "MMF"/Mycophenolic Acid

C

- Usually taken twice daily
- Can be taken with or without food
- **Avoid unplanned pregnancy**; discuss contraception with your doctor, nurse, or pharmacist if needed.

Prednisolone



- Taken once daily in the morning
- Always take with or after food
- You should take a medicine to protect your stomach whilst taking prednisolone (examples include omeprazole, lansoprazole, famotidine)
- If prescribed long-term, you may be given medicines to protect your bones (vitamin D and calcium supplements)
- You should carry steroid cards with you.

Other Transplant Medicines

You may need to take these medicines for the first three to six months after your transplant. Your doctor will tell you when to stop them. You may need to be on all of them; your doctors will decide which ones you need.

Prevention of infections

Co-trimoxazole/Dapsone

C

- Usually taken once daily
- Used to prevent a rare type of chest infection called Pneumocystis jirovecii pneumonia (PJP)
- Usual duration: 3 months.

Fluconazole



- Usually taken once daily
- Used to prevent fungal infections
- Usual duration: 3 months.

Valganciclovir



- Usually taken **once daily**, but dose and frequency may vary
- **Pregnancy risk**; avoid unplanned pregnancy
- Reduces the risk of contracting a viral infection called Cytomegalovirus (CMV)
- Usual duration: 6 months.

Pregnancy after transplantation

Female patients

It is possible that some of the transplant medicines prescribed for you may cause problems in pregnancy. This means that it is very important to use effective contraception after your transplant. If you are thinking about pregnancy, talk to your doctor early so that they can discuss options for changing medications with you.

Valganciclovir: use effective contraception during treatment and for 30 days after stopping.

Mycophenolate/mycophenolic acid: use very effective contraceptive methods (ideally two methods) during treatment and for 6 weeks after stopping treatment.

Male patients

It is possible that some of the transplant medication prescribed for you may affect your sperm. It may be important for male patients and their partners to use effective contraception following a transplant.

Valganciclovir: use a condom during treatment and for 90 days after stopping.

Mycophenolate/mycophenolic acid: although there is a very small risk that the medication could affect your sperm, there is no evidence of harm to children fathered by men taking these medicines. Some patients may choose to switch to an alternative if they are planning having children. This should be discussed with your transplant doctor. In some cases, it might be in your best interest to continue taking the medicines.

Tips to help you remember to take your medicines correctly

Do you forget to take your medicines?

- Make taking your medications part of your daily routine
- Ask your family and friends to remind you when your medicines are due
- Only if it's safe to do so, place your medications where you'll see them (e.g. in a nice tin on a kitchen shelf rather than in the cupboard)
- Use the alarms on your phone to remind you to take your medicine. Don't cancel the alarm until you've taken it
- If you risk oversleeping, leave the medication and water beside your bed and set your alarm
- If you forget whether or not you've taken your medicines, make a chart so you can tick when you've taken the medicine
- You can put your medicines in a weekly dispensing device.

Ensure you do not run out of medication

- Keep a small supply of your medicines at work or in your pocket (not in a car because of temperature changes) in case you forgot to take them
- Make sure you always have a minimum of 10-14 days of medication at home and place repeat prescription order in a timely manner so you don't run out
- If you have a calendar on your phone or tablet, set a recurring message to remind you when to order more.

Going on holiday

- Always take more medicines with you than you think you will need in case you are delayed
- If you are travelling by plane, keep your medicine in your hand luggage; never put it in the hold
- Please note that if you run out of medication abroad, you will need to source extra supply locally
- Tablets must be easily identified by airport security staff; bring tablet boxes (flat packed) if needed or a copy of your repeat prescription. This is especially important if you normally use a dispensing box
- Think about how to fit your medicines into your holiday routine, taking time zones into account.

General information about taking your medication

- This information is intended to give you some general information about your medicines - if you have any further questions please ask your doctor, nurse, or pharmacist
- These medicines are only for you; never give them to anyone else even if their symptoms are the same as yours
- Store your medicines out of the reach of children
- Always check with your doctor or pharmacist before starting any new medicines, including any herbal or natural remedies
- Let your doctor know if you experience any side-effects from your medicines
- Follow the instructions on the label; if you are unsure how to take your medicine, please ask a doctor, pharmacist, or nurse
- Remember, you are more at risk of skin cancer due to your anti-rejection medicines, so you should always take extra precautions in the sun. Use sun-block (factor 50+) and cover up – ask your GP for a prescription if needed

- If you come into hospital, remember to bring all the medication you are taking in with you
- When you come to clinic, we recommend that you bring this booklet with you.

Hints on Medicine Doses

Grams and Milligrams

1g (gram) = 1000mg (milligrams)

- 1 x Paracetamol tablet = 500mg
- 2 x Paracetamol tablets = 1g (2 x 500mg = 1000mg = 1g)

Micrograms and Nanograms

1 microgram = 1000 nanograms

Alfacalcidol 250 nanograms = 0.25 micrograms

Please return any unwanted medicines to your local pharmacy for safe disposal

Edinburgh Transplant Centre, NHS Lothian

V14.0 approved by NHSL Patient Information Team, Dec 2022 For Review: Dec 2025 LOT1235