

Tacrolimus (brand names: Adoport, Prograf, Advagraf)

This information sheet gives you information about your tacrolimus tablets. It explains what the tablets do, how and when to take them and outlines side effects.

What the tablets look like:

Tacrolimus is available in four strengths: 0.5mg, 1mg, 3mg (Advagraf only), 5mg

The most common brand used in IBD is Adoport.

You should only take the brand that is prescribed by your consultant, they are not interchangeable.

Why you are taking tacrolimus:

Tacrolimus belongs to the group of medicines known as "disease modifying" or "second line" agents used to treat inflammatory bowel disease.

It suppresses the disease process by reducing the activity of the immune system.

How to take tacrolimus:

The amount you have to take varies from person to person as it is based on your weight but will likely be between 1 and 2.5mg twice a day, It is very important to check the label on your tablet bottle or box so that you know which strength tablets you have been given as this will affect the number of tablets you will have to take.

Tacrolimus should be taken on an empty stomach or at least **1 hour before or 2-3 hours after a meal.**

What to do if you miss a dose

Do not double up on your next dose, just continue taking the tablets as directed.

Can you take other medicines and alcohol with the new treatment?

There are many drugs that interact with tacrolimus and should therefore be avoided. These include erythromycin, clarithromycin, diltiazem, nifedipine, verapamil, Felodipine, fluconazole, itraconazole, carbamazepine, phenobarbital, phenytoin, rifampicin, orlistat and dabigatran. This list is not exhaustive and therefore all new medications should be checked by the person prescribing them.

St Johns Wort and other herbal preparations should be avoided as they can reduce the amount of tacrolimus your body receives. **Do not** eat grapefruit or drink grapefruit juice whilst taking tacrolimus.

Also if you buy medicines "over the counter" at the community pharmacy (chemist) tell the pharmacist that you are taking Tacrolimus. Alcohol can be taken in moderation.

Side effects that may occur in some patients taking tacrolimus

Tell the doctor or nurse promptly if you think you have noticed any side effects.

- Nausea, upset stomach: The feeling of sickness usually goes away after a time as your body gets used to the treatment. If the sickness is severe, consult your doctor.
- High blood pressure or a fast heart rate, this will be monitored whilst you are on tacrolimus (this can be done by your GP).
- Rash, itching anywhere on body, acne.
- Headaches, tremor, insomnia, visual disorders – please let us know if these are severe.
- Hair loss – this occurs in a small number of patients
- High blood sugars or diabetes – this will be monitored by regular blood tests.
- Tacrolimus sometimes causes blood changes but regular blood tests are performed to monitor this.
- Your body's resistance to certain infections is likely to be reduced whilst taking Tacrolimus. For example, you should avoid close contact with people who have chicken pox.
- You should also avoid having any vaccinations which use live viruses without first discussing it with your doctor. This usually means yellow fever and polio.
- Pancreatitis (inflammation of the pancreas) which can cause severe pain in your stomach. You should let us know immediately if this happens.

- An increased risk of developing lymphoma (a type of cancer affecting the lymph glands). The overall risk is still extremely small and is usually outweighed by the benefits of taking the medication.
- An increased risk of certain types of skin cancer. This can be reduced by using sun screen and wearing suitable clothing if out in the sun.

Special arrangements:

Your doctor will arrange for you to have regular blood tests; two weeks after starting treatment then fortnightly for the first four weeks then every month for the next three months, then every two months thereafter. These will check your immune system, liver function and kidney function to make sure they are not affected. It is essential that you have these blood tests taken; otherwise we may not be able to continue with your prescriptions. It is also important to have your blood pressure checked at these intervals too.

Additional information:

Tacrolimus is best avoided during pregnancy; women of child bearing potential are advised to use a reliable means of contraception during and for at least three months after treatment.

Tacrolimus passes into breast milk and therefore breastfeeding should be avoided while taking Tacrolimus.

If you have any further questions or need advice about your treatment, consult your GP or one of the gastroenterology staff when you come to the clinic. Otherwise if you have any concerns please contact:

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