



# Health Facts for You



Heart transplant medicines

**UW**Health



After your transplant, you will be on many medicines. You will be on many of them for the rest of your life. This includes medicines which:

- Prevent rejection
- Prevent infections
- Control blood pressure
- Manage blood sugars
- Protect your stomach
- Prevent bone loss
- Provide you with extra vitamins and minerals

The team will help you learn about the medicines you need, why you need them, and the dose prescribed for you. Taking your medicines incorrectly can lead to rejection and other health problems.

## Taking Your Medicines

### Why is it important to take your medicines?

You **must** take your medicines exactly as directed by your transplant team. If you do not take your medicines, it can lead to increased risk of organ rejection and loss.

- **Do not** stop a medicine without talking to the transplant team.
- Take the right amount of medicine prescribed for you.
- Take your medicines at the correct dose and frequency.
- Do not take medicines or supplements that are not prescribed.
- Alert the transplant team of any new medications, over the counter supplements or herbals.

### Why do some people not take their medicines?

#### Confusion

- There is confusion about “the right way” to take medicines.
- If have questions about how to take your medicines talk to your Transplant Coordinator.

#### Unable to pay

- The pharmacy team will check with your insurance after your transplant. If you are concerned about paying for your medicines after you leave the hospital, talk to your transplant coordinator or social worker.

#### Lack of supply

- Transplant medicines are not common, so they may not be in stock at all pharmacies.
- You will leave the hospital with a 1 month supply of your new medicines.
- UW Health Pharmacies can be your main pharmacy for refills; a mail order service is also offered for our transplant patients.
- If you use your local pharmacy for refills, **let them know a week before you run out of pills** so they can order the medicines and fill them.
- When you are traveling (this includes traveling to clinic visits), bring a day of medicines with you in case of delays or other travel issues.

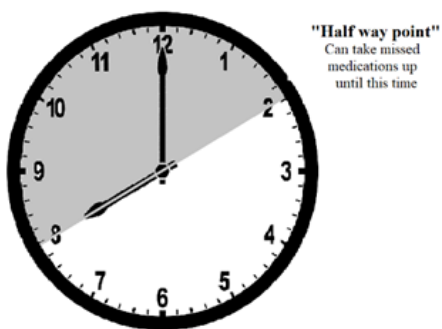
#### Side Effects

- If side effects are serious or bothersome, call your transplant coordinator right away to discuss ways to manage them.
- **Do not stop** taking your medicines unless your transplant coordinator or doctor tells you to.

### What if I miss a dose of medicine?

If you miss a dose, follow the “**Half-Way**” Rule.

- If you are less than “half-way” to your next dose, take your missed dose.
- If you are more than “half-way” to your next dose, skip it and continue with your next scheduled dose.
- **Never** take extra medicine to make up for a missed dose.
- Call your transplant coordinator when you miss more than one dose of anti-rejection medicine.



### How should I store my medicines?

Store your medicines in a cool, dry place out of reach of children. Bathrooms, kitchens, and cars are not good places because of changes in heat and humidity.

### Who should know about my medicines?

Tell **all** of your healthcare providers that you are on anti-rejection medicines, including:

- Dentists
- Doctors or surgeons
- Pharmacists (try to choose one pharmacy to use for all your medicines)

**Tell your transplant coordinator if other doctors make medicine changes right away.**

### Medicines List

Every patient should have an up-to-date medicine list that has:

- Names and doses of medicines you take
- How often you take them
- Why you take them
- Name of your doctor
- Allergies and reactions to any medicines
- Health history

Bring this list to **all** appointments/hospital visits and keep it in your wallet/purse.

### Medicine Box

Medicine boxes organize your medicines and make them easier to take. You may be asked to bring your medication box to the transplant clinic for transplant pharmacist review.

### UW Mail Service Pharmacy

If you would like to use the UW Hospital's prescription mail order program, please ask your transplant pharmacist or coordinator.

### Pharmacy Services

Some pharmacies fill medicine boxes for you or offer automatic refill reminders. Call your local pharmacy to see what services they offer.

### Medicine Refills

- If you are on your last refill of a medicine, call the transplant clinic.
- Request medicine refills at least 7 days before running out. This might need to be longer around holidays.
- Your primary care provider should **not** refill your transplant medicines but should refill your other medicines.

## Anti-Rejection Medicines

When your body's immune system fights your organ, it is known as rejection. Anti-rejection medicines lower your body's immune system response to stop your body from rejecting your new organ. Each anti-rejection medicine works differently to lower your immune system. The medicines you take depend on the type of new organ and your medical history. Anti-rejection medicines are never stopped unless directed to by your transplant doctor.

### Prednisone

<b>Common Side Effects</b>	High blood pressure, cholesterol and blood sugar, thinning skin, easier bruising, swelling, increased restlessness/feeling 'jittery', mood changes, lower bone mass, stomach upset, stomach ulcers, trouble sleeping, bigger appetite, and cataracts
<b>Food</b>	Take with food to prevent upset stomach and ulcers
<b>Special Tips</b>	<ul style="list-style-type: none"><li>• If you have high blood sugar or diabetes, your dose may be twice a day.</li><li>• If you take prednisone once a day, you should take it in the morning, so it is easier to sleep. If you are taking prednisone twice a day, take the second dose in the afternoon, not the evening.</li><li>• Have an eye exam once a year for cataract prevention.</li><li>• You will need scans of your bones (a DEXA scan) at least every other year to monitor bone health.</li></ul>

### Tacrolimus (Prograf/Envarsus XR)

<b>Common Side Effects</b>	Tremor, headache, kidney injury, hair loss, diarrhea, nausea/vomiting, trouble sleeping, and high cholesterol, blood sugar and blood pressure
<b>Food</b>	Take with or without food, but be <b>consistent</b> in what you choose
<b>Interactions</b>	Avoid grapefruit or grapefruit juice, since they increase tacrolimus levels.
<b>Monitoring</b>	<ul style="list-style-type: none"><li>• Tacrolimus blood levels are drawn to make sure you are getting the right amount of the medicine.</li><li>• Blood is drawn right before your morning dose to measure the amount of drug in your body when it is lowest (a trough). Take your dose the day before as directed by your transplant coordinator. This will be either 12 or 24 hours before you will have your level drawn. DO NOT take your morning dose until AFTER your blood is drawn.</li><li>• Your transplant coordinator will tell you your goal tacrolimus level.</li></ul>
<b>Special Tips</b>	<ul style="list-style-type: none"><li>• Call your transplant coordinator if:<ul style="list-style-type: none"><li>○ tremor or headache worsen</li><li>○ you notice burning in your fingers</li><li>○ the shape and/or color of your medicine changes.</li></ul></li><li>• If you take a liquid suspension of tacrolimus, be sure to have the right sized syringe for measuring and adapter to fit your bottle with syringe. Shake the bottle to mix the suspension before drawing up your dose.</li><li>• Let your transplant coordinator know if you are changing where you get your labs drawn as this may affect your tacrolimus level.</li></ul>

### Mycophenolate Sodium (Myfortic) or Mycophenolate Mofetil (Cellcept)XL

<b>Side Effects</b>	Diarrhea, nausea/vomiting, headache, and low white blood cell and hematocrit
<b>Food</b>	Take with food to help prevent stomach upset and diarrhea
<b>Special Tips</b>	<ul style="list-style-type: none"> <li>• Do not crush, chew or cut mycophenolate tablets.</li> <li>• Pregnant persons or people trying to get pregnant should not handle the tablets or capsules due to risk of harm to unborn babies.</li> <li>• People who are able to get pregnant who take mycophenolate must use at least one form of acceptable form of birth control as prescribed by your doctor. If you plan to get pregnant, talk with your transplant coordinator at least 3 months before to change to a different medicine.</li> </ul>

### Cyclosporine (Neoral, Sandimmune) – ALTERNATIVE to Tacrolimus

<b>Common Side Effects</b>	Hair growth, diarrhea, nausea/vomiting, headache, tremor, gum growth, high cholesterol, blood sugar and blood pressure.
<b>Food</b>	Take with or without food but be <b>consistent</b> in what you choose.
<b>Interactions</b>	Avoid grapefruit or grapefruit juice, since they increase cyclosporine levels.
<b>Monitoring</b>	<ul style="list-style-type: none"> <li>• Blood levels of cyclosporine are drawn to make sure you are getting the right amount of the medicine.</li> <li>• Blood is drawn right before your morning dose to measure the amount of drug in your body when it is lowest (a trough). Take your evening dose 12 hours before you will have your level drawn.</li> <li>• <b>Do not</b> take your morning dose until <b>after</b> your blood is drawn.</li> <li>• Your transplant coordinator will tell you your goal cyclosporine level.</li> </ul>
<b>Special Tips</b>	<ul style="list-style-type: none"> <li>• Tell your transplant coordinator if the shape and/or color of your medicine changes.</li> <li>• Different brands may lead to different blood levels.</li> <li>• Capsules expire <b>7 days</b> after opening the foil package.</li> <li>• The oral solution is dispensed in a glass container and should <b>not</b> be refrigerated.</li> <li>• Have 6-month dental cleanings and brush twice daily to prevent gum growth.</li> <li>• Let your transplant coordinator know if you are changing where you get your labs drawn as this may affect your cyclosporine level.</li> </ul>

### Azathioprine (Imuran) – ALTERNATIVE to Mycophenolate

<b>Common Side Effects</b>	Nausea/vomiting, diarrhea, rash, low white blood cell counts, fever
<b>Food</b>	Take with food to prevent stomach upset.
<b>Interactions</b>	Do not take mercaptopurine, allopurinol, or febuxostat with azathioprine. If taking warfarin, contact your warfarin manager when starting this medicine.
<b>Special Tips</b>	Persons who are able to get pregnant who take azathioprine should use birth control.

### Sirolimus (Rapamune): May take instead of or in addition to other anti-rejection medicines

<b>Common Side Effects</b>	Constipation or diarrhea, nausea, headache, swelling, slow wound healing, mouth ulcers, anemia, high cholesterol, blood sugar, and blood pressure
<b>Food</b>	Take with or without food but be <b>consistent</b> in what you choose
<b>Interactions</b>	Avoid grapefruit or grapefruit juice, since they increase sirolimus levels.
<b>Monitoring</b>	<ul style="list-style-type: none"><li>• Blood levels of sirolimus are drawn to make sure you are getting the right amount of the medicine.</li><li>• Blood is drawn right before your morning dose to measure the amount of drug in your body when it is lowest (a trough). Take your dose 24 hours before you will have your level drawn.</li><li>• <b>Do not</b> take your morning dose until <b>after</b> your blood is drawn.</li><li>• Your transplant coordinator will tell you your goal sirolimus level.</li></ul>
<b>Special Tips</b>	<ul style="list-style-type: none"><li>• Do not crush, split, or chew the tablets.</li><li>• Sirolimus should be taken 4 hours after cyclosporine.</li><li>• Let your transplant coordinator know if you are changing where you get your labs drawn. This may affect your sirolimus level.</li></ul>

### Everolimus (Zortress): May take instead of or in addition to other anti-rejection medicines

<b>Common Side Effects</b>	Diarrhea, nausea/vomiting, headache, rash/itching, fatigue, fever, swelling, slow wound healing, anemia, increased cholesterol and blood pressure.
<b>Food</b>	Take with or without food but be <b>consistent</b> in what you choose.
<b>Interactions</b>	Avoid grapefruit or grapefruit juice, since they increase everolimus levels.
<b>Monitoring</b>	<ul style="list-style-type: none"><li>• Blood levels of everolimus are drawn to make sure you are getting the right amount of the medicine.</li><li>• Blood is drawn right before your morning dose to measure the amount of drug in your body when it is lowest (a trough). Take your evening dose 12 hours before you will have your level drawn.</li><li>• <b>Do not</b> take your morning dose until <b>after</b> your blood is drawn.</li><li>• Your transplant coordinator will tell you your goal everolimus level.</li></ul>
<b>Special Tips</b>	<ul style="list-style-type: none"><li>• Do not crush, split, or chew the tablets.</li><li>• Take at the same time as cyclosporine or tacrolimus (if prescribed).</li><li>• Let your transplant coordinator know if you are changing where you get your labs drawn. This may affect your everolimus level.</li></ul>

## Anti-Infective Medicines

After transplant, you are more at risk for getting sick because your immune system is lowered. Anti-infective medicines help prevent infections.

Types of Infection	Medicine
<b>General infections and pneumonia</b>	<b>Trimethoprim/sulfamethoxazole (Bactrim DS or Septra DS) or TMP/Sulfa</b> <ul style="list-style-type: none"> <li>Take for 1 year after transplant.</li> <li>Side effects: Sun sensitivity, nausea/vomiting, diarrhea, rash, high potassium, low white blood cell counts</li> </ul> <b>Atovaquone (Mepron®) – (Alternative to Bactrim®)</b> <ul style="list-style-type: none"> <li>Take for 1 year after transplant.</li> <li>Side effects: headache, insomnia, rash, nausea, change in taste</li> </ul>
<b>Viral Infections (Cytomegalovirus – CMV)</b> <ul style="list-style-type: none"> <li>CMV is a virus that may hide out in the body.</li> <li>This virus is normally harmless but is dangerous when your immune system is lowered.</li> </ul> <b>Herpes Simplex Virus (HSV)</b>	<b>Letermovir (Prevymis®)</b> <ul style="list-style-type: none"> <li>Take for 6 months after transplant. Some people may need to keep taking it. Do not stop this medicine without talking to your transplant team. This could affect your anti-rejection medicine levels.</li> <li>Side effects: upset stomach</li> </ul> <b>Valganciclovir (Valcyte®)– (Alternative to letermovir/Prevymis®)</b> <ul style="list-style-type: none"> <li>Take for 6 months after transplant. Some people will need to keep taking it. Do not stop this medicine without talking to your transplant team. This could affect your anti-rejection medicine levels.</li> <li>Side effects: Decreased white blood cell counts</li> </ul> <b>Acyclovir (Zovirax®)</b> <ul style="list-style-type: none"> <li>Take for 3 months after transplant instead of valganciclovir if at low risk for CMV.</li> <li>May take at the same time as letermovir.</li> <li>Side effects: headache, upset stomach</li> </ul>
<b>Fungal Infections (Aspergillus)</b> <ul style="list-style-type: none"> <li>Common fungus found indoors and outdoors.</li> <li>Exposure to this infection can cause illness when your immune system is weakened by anti-rejection medicines.</li> <li>Most aspergillus infections occur in the lungs, but this fungus can be found in other parts of the body.</li> </ul>	<b>Posaconazole (Noxafil®)</b> <ul style="list-style-type: none"> <li>Take for 3 months after transplant.</li> <li>Side effects: change in taste, nausea. If you have side effects or other issues, you can be changed to a different anti-fungal medicine.</li> <li>You will need dose changes and close monitoring of tacrolimus after stopping posaconazole. Do not stop unless told to do so by your transplant team.</li> </ul>



## Other Medicines

### Blood Pressure Medicines (Goal blood pressure: less than 120/80 mmHg)

- Many transplant patients have high blood pressure or develop high blood pressure as a side effect of anti-rejection medicines.
- Some patients resume their blood pressure medicines from before transplant. Some patients may need new medicines added, or some patients may be able to stop taking blood pressure medicine.
- It is important to own a blood pressure cuff and monitor your blood pressure at home.
- You should keep a logbook of your blood pressure and bring it with you to appointments.
- Blood pressure can also be improved by:
  - Diet and exercise (lose excess weight)
  - Avoiding high-salt foods (Dietary Approaches to Stop Hypertension (DASH) diet)
  - Quitting smoking

### Medicines for High Blood Sugar/Diabetes

- Prednisone and tacrolimus can cause you to have high blood sugar (diabetes).
- You may need insulin or other medicine to lower your blood sugar.
- You may be asked to check your blood sugar up to 4 times a day.

### Antibiotics

- You may need antibiotics to prevent infections before procedures.
- You are advised to take an antibiotic before general teeth cleaning and other dental procedures.

## Medicines to Lower Cholesterol

- Your medicines, diet, or family history may cause you to have increased cholesterol. Medicine may be used to help lower your cholesterol level.
- Some of these medicines (statins) may help reduce your risk of coronary allograft vasculopathy (CAV).
- You may require a statin medicine to reduce your risk of CAV even if your cholesterol is at goal.

## Stomach Protection

Transplant patients will need to take a medicine such as pantoprazole (Protonix®) or omeprazole (Prilosec®) to help reduce stomach acid and protect the stomach for at least 1 month after transplant.

## Blood Clot Prevention

Transplant patients will need aspirin after transplant to prevent blood clots and reduce the risk of cardiac allograft vasculopathy (CAV). If you were on aspirin before transplant, you may need to resume your home dose or adjust to a new dose.

## Vaccines

- **Do not** get vaccines within the first 6 months after transplant unless approved by your transplant coordinator or transplant doctor.
- Avoid live vaccines, including measles, shingles, chicken pox, and the influenza nasal spray.
- People living with you should get the influenza vaccine. They can receive the live vaccine.
- Call your transplant coordinator if you have been around someone who has chicken pox.
- Talk to your transplant team about what vaccines you need after transplant.

## Supplements/ Over-the-Counter Medicines

Avoid other prescription, over-the-counter (OTC), herbal, homeopathic, or dietary supplements unless recommended by your provider and approved by your transplant coordinator.

The supplements/medicines listed below are available without a prescription (over-the-counter or OTC) and are commonly used after heart transplant. If you need these medicines, they will be listed on your discharge medicine list. You will need to buy these at a store or pharmacy after discharge:

Supplement/ Medicine	Purpose	Side Effects	Tips and Comments
<b>Calcium (carbonate or citrate)</b>	Prevents bone loss	Constipation or diarrhea	Look at the “Supplement Facts” on the back of the bottle to see how much elemental calcium is in each tablet.
<b>Vitamin D (cholecalciferol)</b>	Helps your body use calcium	None	You can purchase a combination of calcium and vitamin D.
<b>Multivitamin</b>	General health	Stomach upset	Choose any multivitamin appropriate for your age group.
<b>Pantoprazole (Protonix)</b>	Prevents stomach ulcers	Headache	You may be given a different medicine depending on your insurance.
<b>Aspirin 81 mg</b>	For heart health	Higher risk of bleeding	If you were on aspirin before transplant, you may need to resume your home dose.

## Suggestions for OTC Medicines by Symptom

Symptom	Medicine
<b>Headache, fever, body aches, and joint pain</b>	<p>Acetaminophen (Tylenol®) can help relieve mild pain and fever. Many products may contain acetaminophen. Check labels for the amount in each product.</p> <ul style="list-style-type: none"> <li>The maximum dose of acetaminophen is 4000 mg in 24 hours. This means no more than 12 regular strength or 8 extra strength tablets.</li> <li>If you have had a <b>liver transplant</b>, the dose should not be more than 2000 mg in 24 hours. This means no more than 6 regular strength or 4 extra strength tablets. Higher doses can harm your liver.</li> </ul> <p><b>Joint Pain</b></p> <ul style="list-style-type: none"> <li>Capsaicin cream (Capzasin-P®)</li> </ul> <p><b>Pain Medicines to Avoid:</b> Do not take nonsteroidal anti-inflammatory drugs (NSAIDs) because they can harm your kidney or interact with certain immunosuppressants. Common NSAIDs are:</p> <ul style="list-style-type: none"> <li>Ibuprofen (Advil®, Motrin®, Midol® Cramp Formula)</li> <li>Naproxen (Aleve®)</li> <li>Diclofenac (Voltaren®)</li> <li>Celecoxib (Celebrex®)</li> </ul> <p>Avoid taking aspirin unless your doctor prescribed it. Aspirin is in some other pain relievers such as Excedrin® or Bayer®.</p>
<b>Sneezing, itching and runny nose</b>	<p>Medicines that are considered non-drowsy:</p> <ul style="list-style-type: none"> <li>Loratadine (Claritin®)</li> <li>Cetirizine (Zyrtec®)</li> <li>Fexofenadine (Allegra®)</li> <li>Levocetirizine (Xyzal®)</li> <li>Cromolyn (NasalCrom®)</li> </ul> <p>Medicines that can make you sleepy:</p> <ul style="list-style-type: none"> <li>Diphenhydramine (Benadryl®)</li> <li>Chlorpheniramine (Chlor-trimeton®)</li> </ul> <p>These are best used at bedtime. Talk to your doctor before using an antihistamine if you have glaucoma, an enlarged prostate or trouble urinating.</p> <p>Avoid combination cold, sinus, and flu products (TheraFlu®, Nyquil®).</p>

Symptom	Medicine
<b>Nasal and sinus congestion</b>	<p>Topical nasal sprays are the most helpful for congestion.</p> <p>Do not use for more than 3 days. Longer use can cause more congestion.</p> <ul style="list-style-type: none"> <li>• oxymetazoline (Afrin<sup>®</sup>)</li> <li>• phenylephrine (Neosynephrine<sup>®</sup>).</li> </ul> <p>Long term use for decongestion.</p> <ul style="list-style-type: none"> <li>• Sodium chloride 9.9% (Ocean<sup>®</sup> spray)</li> <li>• SinuCleanse<sup>®</sup> saline solution used as a nasal washing through a device or bottle.</li> </ul> <p>Oral decongestants, such as pseudoephedrine (Sudafed<sup>®</sup>) and phenylephrine (Sudafed PE<sup>®</sup>) should be used with care because they can raise your blood pressure. Make sure to check the list in any cough or cold product for pseudoephedrine and phenylephrine.</p>
<b>Sore throat</b>	Most throat lozenges can be used safely.
<b>Chest congestion</b>	<p>Make sure to drink plenty of water to help loosen chest congestion.</p> <ul style="list-style-type: none"> <li>• Guaifenesin (Robitussin<sup>®</sup>)</li> <li>• Coricidin<sup>®</sup> HBP Chest Congestion &amp; Cough</li> </ul>
<b>Cough</b>	<p>Loose cough</p> <ul style="list-style-type: none"> <li>• Guaifenesin (Robitussin<sup>®</sup>) for a loose cough.</li> </ul> <p>Dry cough,</p> <ul style="list-style-type: none"> <li>• Dextromethorphan (Delsym<sup>®</sup>)</li> <li>• Guaifenesin/DM combination (Robitussin DM<sup>®</sup>)</li> <li>• Coricidin<sup>®</sup> HBP Chest Congestion &amp; Cough (safe for patients with high blood pressure.)</li> </ul> <p>All types of coughs</p> <ul style="list-style-type: none"> <li>• Vicks<sup>®</sup> VapoRub ointment</li> <li>• Vicks<sup>®</sup> VapoSteam.</li> </ul>
<b>Painful urination</b>	<p>Do not use:</p> <ul style="list-style-type: none"> <li>• Phenazopyridine (Azo-Standard<sup>®</sup>) to treat undiagnosed urinary tract pain.</li> </ul> <p>This product treats painful symptoms but not the source of the infection. Contact your doctor if you have urinary pain.</p>

Symptom	Medicine
Constipation	<p>Constipation can be treated with:</p> <ul style="list-style-type: none"> <li>• Bulk-forming products: Metamucil<sup>®</sup>, Fiberall<sup>®</sup></li> <li>• Stool softeners, such as docusate (Colace<sup>®</sup>)</li> <li>• Bisacodyl (Dulcolax<sup>®</sup>)</li> <li>• Senna</li> <li>• Milk of magnesia (Phillip's<sup>®</sup>)</li> <li>• Polyethylene glycol (MiraLAX<sup>®</sup>)</li> <li>• Combinations of a stool softener with a stimulant such as docusate with senna (Senokot-S<sup>®</sup>).</li> </ul> <p>Long-term use of stimulant laxatives should be avoided because they may result in long-term diarrhea and changes in your electrolytes. If you are <b>constipated for more than 48 hours</b>, please contact your primary care doctor.</p>
Upset stomach	<p>Stomach upset can be treated with:</p> <ul style="list-style-type: none"> <li>• Calcium Carbonate (TUMS<sup>®</sup>)</li> <li>• Famotidine (Pepcid AC<sup>®</sup>)</li> <li>• Nizatidine (Axiid AR<sup>®</sup>)</li> <li>• Omeprazole (Prilosec OTC<sup>®</sup>)</li> <li>• Esomeprazole (Nexium 24HR<sup>®</sup>)</li> </ul> <p><b>Do not take:</b></p> <ul style="list-style-type: none"> <li>• Cimetidine (Tagamet<sup>®</sup>)</li> </ul>
Gas	<ul style="list-style-type: none"> <li>• Simethicone (Gas-X<sup>®</sup>) for gas symptoms</li> </ul>
Insomnia (trouble sleeping)	<ul style="list-style-type: none"> <li>• Diphenhydramine (Benadryl<sup>®</sup>, ZzzQuil<sup>®</sup>)</li> <li>• Doxylamine (Unisom<sup>®</sup>)</li> <li>• Melatonin</li> </ul>
Dry eyes and eye irritation	<ul style="list-style-type: none"> <li>• Artificial tears eye drops</li> <li>• Ketotifen (Zaditor<sup>®</sup>)</li> </ul>
Nausea and vomiting	<ul style="list-style-type: none"> <li>• Meclizine (Antivert<sup>®</sup>)</li> </ul>
Skin irritation/dry skin	<ul style="list-style-type: none"> <li>• Sarna lotion</li> <li>• Oatmeal lotion</li> <li>• Vaseline</li> </ul>
Insect bites and poison ivy	<ul style="list-style-type: none"> <li>• Topical corticosteroids, such as hydrocortisone cream (Cortisone-10<sup>®</sup>)</li> </ul> <p>Use of topical corticosteroids should be short term.</p>

## Managing Side Effects

Use the table below to help manage your medicine side effects. If your side effects are serious or bothersome, call your transplant coordinator.

Side Effect	How to Manage
<b>Acne</b>	<ul style="list-style-type: none"> <li>• Treat with prescription or over-the-counter medicines, such as benzoyl peroxide</li> <li>• Keep your skin clean by washing your face two times per day.</li> <li>• Avoid moisturizing soaps and lotions with oils (try oil free)</li> <li>• Do not pick at pimples since it can increase your risk of infection</li> </ul>
<b>Hair Loss</b>	<ul style="list-style-type: none"> <li>• Use a conditioner after shampooing.</li> <li>• Avoid perms, dyes, or bleaching.</li> <li>• Limit your exposure to chlorine (swimming pools) and the sun</li> </ul>
<b>Swelling</b>	<ul style="list-style-type: none"> <li>• Treat with diuretics (water pills) as prescribed by your doctor</li> <li>• Weigh yourself daily.</li> <li>• Call your transplant coordinator if you gain more than 3 pounds in one day or more than 5 pounds in one week.</li> <li>• Avoid salt.</li> <li>• Increase physical exercise</li> </ul>
<b>Headaches</b>	<ul style="list-style-type: none"> <li>• Call your transplant coordinator if you have severe headaches.</li> <li>• Avoid caffeine, bright light, stress, and loud noises.</li> <li>• Avoid medicine that has aspirin in it.</li> <li>• Try 1 or 2 regular strength Tylenol tablets to relieve a mild headache</li> </ul>
<b>Hair Growth</b>	<ul style="list-style-type: none"> <li>• Hair may be removed by bleaching, trimming, shaving or with hair removal products</li> </ul>
<b>High Cholesterol</b>	<ul style="list-style-type: none"> <li>• Take your cholesterol medicines as directed by your doctor.</li> <li>• Exercise regularly</li> <li>• Eat a diet low in fat and cholesterol, and high in fiber</li> </ul>
<b>Infection</b>	<ul style="list-style-type: none"> <li>• Wash your hands often with antibacterial soap.</li> <li>• Avoid contact with sick people.</li> <li>• Use gloves if pet waste must be handled.</li> <li>• Clean cuts with soap and water and apply a triple antibiotic ointment and cover</li> </ul>
<b>Bone Loss</b>	<ul style="list-style-type: none"> <li>• Take calcium and vitamin D daily.</li> <li>• Quit smoking.</li> <li>• Do not use alcohol.</li> <li>• Walk and lift weights to keep bones strong</li> </ul>
<b>Tremors</b>	<ul style="list-style-type: none"> <li>• Call your transplant coordinator if you have tremors:</li> <li>• Stretching exercises may help relieve mild tremors</li> </ul>

## **Top 10 Medicine Tips for Transplant Patients**

1. Take all medicines as prescribed by your transplant team. Use your most up to date medicine list rather than the directions on your pill bottle. Your transplant will not last if you do not take them.
2. Keep a list of your current medicines. Bring this list, your medicine box or prescription bottles to all hospital and clinic visits.
3. Do not take ibuprofen, naproxen, or ketoprofen. Talk with your doctor about taking more than 81 mg of aspirin a day. These NSAIDS can harm your kidneys.
4. Store your medicines in a cool, dry place. They cannot be near any heat source. Keep all medicine out of sight and reach of children and pets.
5. If you miss a dose of a medicine you take once a day, take it as soon as you remember. If you take a medicine twice a day, and if you are more than 6 hours late, skip the missed dose. Take the next dose at your normal time. Do not double up the dose.
6. If you or your local doctor feels that you need a new medicine, check with your transplant coordinator first.
7. Be careful not to run out of medicine. Get refills before your supply gets too low. Make sure you have enough between clinic visits and over weekends, holidays, or vacation.
8. When you get medicine from the pharmacy, make sure the name and dose match what the transplant team told you. If a refill looks different, be sure to tell your pharmacist.
9. If you become pregnant or plan to become pregnant, contact your doctor right away.
10. Your doctor will want to check the way your body responds to your medicine. Be sure to keep all your scheduled check-ups and blood tests

## Important Phone Numbers

Question about:	Who to Call
Mail order medicines	UW Mail Order Pharmacy: <b>(866) UWH-DRUG or (866) 894-3784</b>
Medicines filled through the UW pharmacy	UW Outpatient Pharmacy: <b>(608) 263-1280</b>
Medicines within 24 hours after discharge	Hospital Transplant Unit: <b>(608) 263-8720</b>

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 2/2025 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing HF#8193.