

# Renal Impairment Doses

#### **Adults:**

## → Renal Impairment GFR (mL/min):

Immediate post-transplant period: No dosage adjustment necessary for any degree of kidney dysfunction. Rapid achievement of adequate immunosuppressive concentrations is necessary to prevent rejection.

Chronic use (including outside the immediate post-transplant period):

eGFR <25 mL/minute/1.73 m2: No initial dosage adjustment necessary; use with caution. For nontransplant indications, consider limiting dose to mycophenolate mofetil 1 g twice daily or mycophenolate sodium delayed release 720 mg twice daily. [1]

#### **Pediatrics:**

## → Renal Impairment GFR (mL/min):

Mycophenolate mofetil: Infants ≥3 months and children:

- Dose adjustments are not needed in kidney transplant patients experiencing delayed graft function postoperatively.
- Kidney transplant with mild to moderate chronic impairment (GFR ≥25 mL/minute/1.73 m2): No adjustment necessary.
- Kidney transplant with severe chronic impairment (GFR <25 mL/minute/1.73 m2): Avoid doses >1,000 mg/dose twice daily; monitor carefully.

Mycophenolate delayed-release tablet: Children ≥5 years:

No dosage adjustments

[1] - Bergan S, Brunet M, Hesselink DA, et al. Personalized therapy for mycophenolate: consensus report by the International Association of Therapeutic Drug Monitoring and Clinical Toxicology. The Drug Monit. 2021;43(2):150-200. doi:10.1097/FTD.000000000000871[PubMed 33711005]