

Kidney transplantation, rejection prophylaxis

Adults:

500 micrograms once daily ^[1]

First-dose, 6-hour monitoring is recommended for all patients. Administer the first dose and doses following therapy interruption (longer than 14 days) in a setting in which resources to appropriately manage symptomatic bradycardia are available.

- In high-risk populations or in countries with high tuberculosis burden, screen for latent infections (eg, hepatitis, tuberculosis) prior to initiating therapy.
- For patients who screen positive for latent infections, consult infectious disease or other appropriate specialists (eg, liver specialists) regarding treatment options before initiating therapy ^[2]

Geriatrics:

Refer to adult dosing. ^[3]

[1]- Ashley, Caroline, and Aileen Dunleavy. 2018. The Renal Drug Handbook: The Ultimate Prescribing Guide for Renal Practitioners, 5th Edition. 5th ed. London, England: Routledge, https://www.medicinainterna.net.pe/sites/default/files/The_Renal_Drug_Handbook_The_Ultimate.pdf

[2]- (lexi Drugs) Farez, M. F., Correale, J., Armstrong, M. J., Rae-Grant, A., Gloss, D., Donley, D., Holler-Managan, Y., Kachuck, N. J., Jeffery, D., Beilman, M., Gronseth, G., Michelson, D., Lee, E., Cox, J., Getchius, T., Sejvar, J., & Narayanaswami, P. (2019). Practice guideline update summary: Vaccine-preventable infections and immunization in multiple sclerosis: Report of the Guideline Development, Dissemination, and Implementation Subcommittee of the American Academy of Neurology. *Neurology*, 93(13), 584–594. <https://doi.org/10.1212/WNL.00000000000008157>

[3]- (lexi Drugs) https://online.lexi.com/lco/action/doc/retrieve/docid/patch_f/2894008?cesid=3uRmrzlore6&searchUrl=%2Ffco%2Faction%2Fsearch%3Fq%3Dfingolimod%26t%3Dname%26va%3Dfingolimod

