

Prograf[®] (tacrolimus) – New formulation

- On May 24, 2018, the [FDA approved Prograf \(tacrolimus\)](#) granules for oral suspension, for the prophylaxis of organ rejection in patients receiving allogeneic liver, kidney or heart transplants, in combination with other immunosuppressants.
 - The new formulation was designed to support the use of tacrolimus in pediatric patients.
- Tacrolimus is also available as oral capsules ([generic](#) and branded Prograf) intravenous injection, extended-release capsules ([Astragraf XL[®]](#)), extended-release tablets ([Envarsus XR[®]](#)), and topical [ointment](#).
 - Consult individual drug labels for indication information.
- Prograf carries a boxed warning for malignancies and serious infections.
- The safety and effectiveness of Prograf granules have been established in pediatric liver, kidney, and heart transplant patients.
 - Safety and efficacy using Prograf granules in pediatric liver transplant patients < 16 years of age are based on evidence from active controlled studies that included 56 pediatric patients, 31 of which received Prograf and supported by two pharmacokinetic (PK) and safety studies in 151 children who received Prograf. Additionally, 122 pediatric patients were studied in an uncontrolled trial of tacrolimus in living related donor liver transplantation. Dose adjustments were made in the PK studies based on clinical status and whole blood concentrations. Pediatric patients generally required higher doses of Prograf to maintain blood trough concentrations of tacrolimus similar to adult patients.
 - Use of Prograf capsules and Prograf granules in pediatric kidney and heart transplant patients is supported by adequate and well-controlled studies and PK data in adult kidney and heart transplant patients with additional PK data in pediatric kidney and heart transplant patients and safety data in pediatric liver transplant patients.
- The recommended dosage of Prograf granules for oral suspension or capsules in pediatric kidney transplant and heart transplant patients is 0.3 mg/kg/day orally, divided in two doses, administered every 12 hours. In pediatric liver transplant patients, the dose is 0.15 - 0.2 mg/kg/day as capsules or 0.2 mg/kg/day as oral suspension, divided in two doses, administered every 12 hours.
 - For conversion of pediatric patients from Prograf granules to Prograf capsules or from Prograf capsules to Prograf granules, the total daily dose should remain the same. Following conversion from one formulation to another formulation of tacrolimus, therapeutic drug monitoring is recommended.
 - Prograf capsules and granules are not interchangeable or substitutable with other tacrolimus extended-release products.
 - Therapeutic drug monitoring is recommended for all patients receiving Prograf.
 - Consult the Prograf drug label for additional dosing information.

- Astellas plans to launch Prograf granules for oral suspension in early 2019. Prograf granules for oral suspension will be available as 0.2 mg and 1 mg unit-dose packets.



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