If you have any concerns regarding your treatment, please contact:

NMO Nurse Specialist
Tel 0151 529 8357
nmo.advice@thewaltoncentre.nhs.uk

Or
NMO Nurse Specialist
Tel 01865 231 905
nmo.advice@ouh.nhs.uk

www.nmouk.nhs.uk
What is Mycophenolate Mofetil?
Mycophenolate (CellCept) is an immunosuppressant drug, it reduces the activity of the body's immune system (the defence system) dampening down the underlying disease process with the aim of preventing relapses, rather than treating symptoms.
Mycophenolate is used in many other conditions apart from NMO such as organ transplants, rheumatic disease, systemic lupus erythematosus (SLE) and vasculitis (inflammation of blood vessels).

How long does it take to work?
Mycophenolate does not work immediately it can take up to 8 - 12 weeks to take effect. Mycophenolate cannot cure the condition and you may need to take it for several years to keep your relapses under control.

What happens if I need an operation?
Let the doctor or nurse know so they can advise you what to do about your Mycophenolate therapy. If you do need an operation, in most cases you will be advised to continue taking the Mycophenolate.

Alcohol
It is safe to drink alcohol in moderation whilst on Mycophenolate, however, it may aggravate liver problems.

Is Mycophenolate OK in pregnancy and breastfeeding?
Mycophenolate can harm the unborn child and it is very important not to become pregnant whilst taking Mycophenolate therefore reliable contraception is essential. If you are planning a family you should not become pregnant for at least 6 weeks after stopping mycophenolate. If you become pregnant whilst taking Mycophenolate, you should stop immediately and discuss with your doctor as soon as possible. You should not breastfeed while taking Mycophenolate. The drug could pass into the breast milk and the risk to the baby is unknown.
Do I need any special checks while on Mycophenolate?
Mycophenolate can affect the white cell count, and may cause liver or kidney problems. It is important to have your blood regularly checked for early signs of changes. These blood tests show if the medication is working to control the inflammation or if you are developing any side effects.

We recommend the following blood tests:
- full blood count including platelets,
- urea and electrolytes
- liver function tests

Initially bloods are taken weekly for 6 weeks, fortnightly for 6 weeks, monthly for 6 months and then 2 monthly, unless problems occur and then bloods will be monitored more frequently.

The blood tests can be done at the clinic or, with agreement of your GP at your local surgery.

You may be asked to keep a record booklet with your blood test results. Bring this with you when you visit your GP, hospital or dentist.

The dose starts at 500mg twice a day, increased in increments of 500mg every week up to 1gram twice a day. Your doctor will advise you about the correct dose and may be changed depending on your response to the medication.

What do I do if I miss a dose?
Take your next dose at the normal time. Do not double the dose. If you take too much Mycophenolate tell your doctor.

Can I take other medicines along with Mycophenolate?
Mycophenolate may be prescribed along with other drugs in treating your condition. Some drugs interact with Mycophenolate, such as anti-bacterial e.g. Metronidazole or Rifampicin so you should always tell any other doctor treating you that you are taking Mycophenolate.

Do not take over-the-counter preparations or herbal remedies without discussing this first with your doctor, nurse or pharmacist.
What are the possible side effects?
The most common side-effects of Mycophenolate are taste disturbance, nausea, or gastro-intestinal (stomach) inflammation or pain and weight loss. These side effects often occur at the beginning of treatment but settle as you become used to the medication. Mycophenolate can affect the production of some of the cells in the bone marrow. This can make you more prone to infections, or cause problems with clotting of your blood or wound healing.
There is a slightly increased risk of certain types of skin cancer with Mycophenolate, you should avoid exposure to strong sunlight and protect your skin with sun block or sunscreen.

What do I do if I experience side effects?
If you experience any signs of illness or side effects such as infection, unexplained bruising, bleeding, sore throat, mouth ulcers fever or malaise, contact your nurse, doctor, or pharmacist. It may be necessary for you to have a blood test to check how your body is coping.

If you have not had chickenpox but come into contact with someone who has chickenpox or shingles, or if you develop chickenpox or shingles, you should contact your doctor or nurse as soon as possible. This is because chickenpox and shingles can be severe in people on treatment such as Mycophenolate which effects the immune system. Therefore you may require antiviral treatment.

Vaccinations
It is recommended that you should not be immunised with 'live' vaccines such as yellow fever. However, in certain situations a live vaccine may be necessary (for example rubella immunisation in women of childbearing age), in which case your doctor will discuss the possible risks and benefits of the immunisation with you. Pneumovax and yearly flu vaccines are safe and recommended.