

Mycophenolate

Care Team Contact Information: _____

Pharmacy Contact Information: _____

Diagnosis: _____

- This treatment is often used to prevent and treat graft-versus-host disease (GVHD).
- It may also be used for other reasons.

Goal of Treatment: _____

- Treatment may continue for a certain time period, until it no longer works, or until side effects are no longer controlled.

Treatment Regimen

Treatment Name	How the Treatment Works	How the Treatment is Given
Mycophenolate (mye-koe-FEN-oh-late): Cellcept (SEL-sept), Myhibbin (my-HIB-in), Myfortic (my-for-tic)	Prevents donor immune cells (T-cells) from attacking your body.	• Capsule(s) or tablet(s) taken by mouth. • Oral suspension taken by mouth. • Infusion into a vein (intravenous (IV) infusion).

Treatment Administration and Schedule

Your mycophenolate dosing instructions:

- Mycophenolate comes in 1 capsule strength: 250 mg; and 3 tablet strengths: 180 mg, 360 mg, and 500 mg.
- Your dose is based on many factors, including your height and weight, overall health, and diagnosis.
- Mycophenolate is usually taken 2 to 3 times a day; take it around the same times each day.
- Take mycophenolate capsules, tablets, and oral suspension on an empty stomach, unless your care team tells you otherwise.
- Do not crush, chew, or cut mycophenolate tablets.
- Do not open or crush mycophenolate capsules.
- Do not mix mycophenolate oral suspension with any other medicine. It should not be mixed with any type of liquids before taking the dose.
- If you miss a dose of mycophenolate, or you are not sure when you took your last dose, take your prescribed dose of mycophenolate as soon as you remember. If your next dose is less than 2 hours away, skip the missed dose and take your next dose at your normal scheduled time. Do not take 2 doses at the same time. Call your care team if you are not sure what to do.

Treatment Administration and Schedule (Continued)

- If you vomit after taking mycophenolate, do not take another dose at that time. Wait and take your next dose at your scheduled time.
- If you take too much mycophenolate, call your care team right away.

Storage and Handling of Cellcept

- Store Cellcept capsules and tablets at room temperature between 59°F and 86°F (15°C and 30°C).
- Keep Cellcept tablets in the light resistant container that it comes in.
- Store Cellcept oral suspension at room temperature between 59°F and 86°F (15°C and 30°C), for up to 60 days. You can also store Cellcept oral suspension in the refrigerator between 36°F and 46°F (2°C and 8°C). Do not freeze.
- If someone else is giving you your medication, they should wear gloves or pour the pills directly from the bottle into the cap, a small cup, or your hand without touching them. They should wash their hands before and after handling the pills.
- Keep mycophenolate and all medicines out of the reach of children and pets.
- Ask your care team how to safely throw away any unused mycophenolate.

Storage and Handling of Myhibbin

- Store Myhibbin at room temperature between 68°F and 77°F (20°C and 25°C). Do not freeze.
- Wear gloves when wiping the Myhibbin bottle and bottle cap.
- If someone else is giving you your medication, they should wear gloves or pour the pills directly from the bottle into the cap, a small cup, or your hand without touching them. They should wash their hands before and after handling the pills.
- Keep mycophenolate and all medicines out of the reach of children and pets.
- Ask your care team how to safely throw away any unused mycophenolate.

Storage and Handling of Myfortic

- Store Myfortic at room temperature between 59°F and 86°F (15°C and 30°C). Myfortic does not need to be refrigerated.
- Keep the container tightly closed. Store Myfortic in a dry place.
- If someone else is giving you your medication, they should wear gloves or pour the pills directly from the bottle into the cap, a small cup, or your hand without touching them. They should wash their hands before and after handling the pills.
- Keep mycophenolate and all medicines out of the reach of children and pets.
- Ask your care team how to safely throw away any unused mycophenolate.

Appointments

Appointments may include regular check-ups with your care team, lab visits, and imaging tests. It's important to keep your appointments whenever you can. If you miss any appointments, call your care provider as soon as possible to reschedule your appointment.

Common Side Effects

Side Effect	Important Information
Low White Blood Cell (WBC) Count (Neutropenia) and Increased Risk of Serious Infections (Boxed Warning)	Description: WBCs help protect your body from infections. A low WBC count increases your risk of infection. Recommendations: - Wash your hands often and bathe regularly. - Avoid crowded places and close contact with people who are sick. - Follow food safety and wound care advice from your care team. - Your care team may prescribe medicine to help your WBCs recover. Talk to your care team if you have: - Fever of 100.4°F (38°C) or higher - Chills - New or worsening cough or sore throat - Painful urination or signs of a urinary infection - Feeling much more tired than usual - Red, swollen, warm, or painful areas on the skin (possible skin infection)
Low Platelet Count (Thrombocytopenia)	Description: Platelets help your blood clot and wounds heal. A low platelet count increases your risk of bruising and bleeding. Recommendations: - Blow your nose gently and avoid picking it. - Brush your teeth gently with a soft toothbrush and keep good oral hygiene. - Use an electric razor for shaving and a nail file instead of nail clippers. - Avoid over-the-counter medicines that can increase bleeding risk (for example, nonsteroidal anti-inflammatory drugs (NSAIDs) like ibuprofen). - Talk with your care team or dentist before medical or dental procedures — you may need to pause treatment. Talk to your care team if you have: - A nosebleed lasting more than 5 minutes despite pressure - A cut that continues to bleed - Heavy gum bleeding when brushing or flossing - Sudden or severe headache - Blood in your urine or stool - Blood in your spit after coughing
Low Red Blood Cell (RBC) Count and Hemoglobin (Hgb) (Anemia)	Description: RBCs and Hgb carry oxygen to your body's tissues and remove carbon dioxide. Low RBC or Hgb (anemia) can make you feel weak or very tired, or may make you look pale. Recommendations: - Aim for 7 to 8 hours of sleep each night. - Do not drive, operate heavy machinery, or do other dangerous activities if you are very tired. - Balance activity and rest — stay as active as you can, but rest when needed. - Eat a balanced diet and follow any nutrition or supplement advice from your care team. Talk to your care team if you have: - Shortness of breath - Dizziness or fainting - Fast or irregular heartbeats - Sudden or severe headache

High Blood Pressure (Hypertension)	Description: High blood pressure means the force of blood against your artery walls is too high. Treatment can raise your blood pressure or make it harder to control. Recommendations: • Exercise regularly, control your weight, and limit alcohol and salt (sodium). • Take blood pressure medicines as prescribed. Your care team may change your medicines if needed. • Your care team may ask you to check and record your blood pressure at home. Bring readings to appointments. • Follow diet and lifestyle advice from your care team Talk to your care team if you have: • Severe or new headaches • Dizziness or lightheadedness • Blurred vision • Trouble breathing • Nosebleeds that do not stop • A pounding sensation in your chest, neck, or ears • Irregular or fast heartbeats • Chest pain or pressure
Swelling of the Legs and Feet (Edema)	Description: Swelling and fluid retention can occur in different areas of the body, like the legs or hands. You might notice areas feel puffy or tighter than usual. Recommendations: • Keep a daily log of swelling and note any changes in size or location. • Elevate swollen limbs when resting. • Limit salt intake. • Stay active with regular, gentle exercises. • Avoid prolonged periods of sitting or standing without movement. Talk to your care team if you have: • Swelling that suddenly worsens or spreads to other areas • Pain, redness, or warmth in the affected area • Signs of shortness of breath or difficulty breathing • Swelling is persistent and does not improve with home management • Unexpected weight gain Note: Your care team may ask you to contact them if your weight increases by a certain amount over a certain time period.

Nausea and Vomiting	Description: Nausea is an uncomfortable feeling in your stomach or the need to throw up. You may or may not vomit. Recommendations: • Eat smaller, more frequent meals. • Avoid fatty, fried, spicy, or highly sweet foods. • Eat bland foods at room temperature and drink clear liquids. • If you vomit, start with small sips of water, broth, or other clear liquids. If these stay down, try soft foods (such as gelatin, plain cornstarch pudding, yogurt, strained soup, or strained cooked cereal) and gradually return to solid foods. • Your care team may prescribe medicine for these symptoms. Talk to your care team if you have: • Vomiting for more than 24 hours • Nonstop vomiting • Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine) • Blood or coffee-ground-like appearance in your vomit • Severe stomach pain that does not go away after vomiting
Stomach-Area (Abdominal) Pain	Description: Abdominal pain is when you feel discomfort or pain in the belly area. Talk to your care team if you have: • Severe abdominal pain
Diarrhea	Description: Diarrhea is loose, watery stools or more frequent bowel movements than usual. It can cause dehydration and weakness. Recommendations: • Keep track of how often you go to the bathroom each day. • Drink 8 to 10 glasses of water or other fluids daily, unless your care team tells you otherwise. • Eat small meals of mild, low-fiber foods (such as bananas, applesauce, potatoes, chicken, rice, and toast). • If you have diarrhea, avoid high-fiber foods (such as raw vegetables, fruits, and whole grains), gas-producing foods (such as broccoli and beans), dairy (such as milk and yogurt), and spicy, fried, or greasy foods. • Your care team may recommend an antidiarrheal medicine such as loperamide (Imodium). Talk to your care team if you have: • 4 or more bowel movements than normal in 24 hours • Dizziness or lightheadedness while having diarrhea • Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine) • Bloody diarrhea

Constipation	Description: Constipation means hard, dry stools or fewer bowel movements than normal. It can cause discomfort or pain. Recommendations: • Track how often you have bowel movements each day. • Drink 8 to 10 glasses of fluids daily, unless your care team says otherwise. • Stay active and exercise regularly. • Eat more high-fiber foods (such as raw fruits, vegetables, and whole grains) unless advised otherwise. • Your care team may recommend laxatives such as polyethylene glycol (Miralax) or senna. Talk to your care team if you have: • Constipation lasting 3 or more days • No bowel movement 48 hours after using a laxative
High Cholesterol Levels (Hypercholesterolemia)	Description: Treatment can raise the cholesterol levels in your blood. While cholesterol is needed by the body, high levels can be harmful and may lead to heart issues. Recommendations: • Adopt a diet low in saturated and trans fats, increase fiber intake, and engage in regular physical activity. • Maintain a healthy weight. • Get regular cholesterol tests and inform the care team of any significant changes. • Do not smoke and limit alcohol consumption. Talk to your care team if you have: • Symptoms of heart attack or stroke, such as sudden numbness, weakness, or chest pain
Cough	Description: A cough is a reflex action that forcefully expels air from the lungs to clear the airways of irritants or mucus. Recommendations: • Tell your care team what your cough feels like and when it happens. • Use a humidifier and drink plenty of water. • Keep your house clean by dusting and vacuuming regularly. • Avoid exposure to smoke or strong chemicals. • Your care team may recommend medicine for cough. Talk to your care team if you have: • Trouble breathing • Chest pain or tightness • Coughing up blood

Trouble breathing (Dyspnea)	Description: Treatment may make you feel like it's a struggle to get enough air into your lungs. Recommendations: • Stay hydrated by drinking plenty of fluids to help thin mucus. • Avoid irritants such as smoke, strong odors, and allergens. • Use humidifiers to add moisture to the air and soothe airways. • Practice controlled breathing techniques, like pursed-lip breathing. • Elevate your head with extra pillows when resting or sleeping, if needed. • Limit physical exertion and take breaks during activities. Talk to your care team if you have: • Trouble breathing • Chest pain or tightness • Cough
Headache	Description: Headaches are pain in your head that can vary in intensity, frequency, and location. Recommendations: • Keep a headache diary to track the frequency, duration, intensity, and triggers of your headaches. • Stay hydrated by drinking plenty of water, as dehydration can contribute to headaches. • Apply a cold or warm compress to your forehead or neck to help ease headache pain. • Get adequate sleep (7 to 8 hours per night) and establish a regular sleep schedule. • Limit caffeine intake. • Your care team may recommend medicine for headaches. Talk to your care team if you have: • Severe headache • More frequent or worsening headaches • Dizziness or feeling faint • Confusion • Changes in vision

High Blood Sugar (Hyperglycemia)	Description: Treatment may cause high blood sugar levels. Your care team will do blood tests to check you for these changes and will treat you if needed. Recommendations: • Eat a well-balanced diet. • Limit sugary drinks and foods. • Eat smaller, more frequent meals. • Be physically active for at least 30 minutes most days. • Your care team may ask you to check your blood sugar at home. If you are already doing this, they may ask you to do it more frequently. Talk to your care team if you have: • Frequent urination • Drowsiness • Increased thirst • Loss of appetite • Blurred vision • Fruity smell on your breath • Confusion • Nausea, vomiting, or stomach pain • It becomes harder to control your blood sugar
Pain	Description: Pain is an uncomfortable feeling that can happen anywhere in your body and can vary in intensity. It can be sharp, throbbing, aching, or burning, and it may feel like a discomfort or pressure. Recommendations: • Keep a pain diary to track the frequency, duration, and intensity of your pain. • Your care team may recommend medicine for pain. Talk to your care team if you have: • Uncontrolled pain
Sensitivity to Sunlight (Photosensitivity)	Description: Sun sensitivity is when your skin becomes more reactive or sensitive to sunlight than usual. This can lead to conditions such as sunburn, rashes, or other skin problems, even after brief exposure. Recommendations: • Stay out of the sun as much as possible to reduce your risk of sunburn, especially between 10 AM and 4 PM, when ultraviolet (UV) rays are strongest. • Wear long-sleeved shirts with UV protection if possible. • Use broad-brimmed hats for extra sun protection. • Apply broad-spectrum sunscreen (UVA/UVB) with at least sun protective factor (SPF) 30, as directed. • Use lip balm with SPF 30 or higher. Talk to your care team if you have: • Severe or painful sunburns

Changes in Electrolytes and Other Laboratory Results	Description: Treatment may cause low levels of potassium and magnesium in your blood. Your care team will do blood tests to check you for these changes and will treat you if needed. Talk to your care team if you have: • New or worsening muscle weakness or cramps • Irregular, fast, or pounding heartbeat, or chest pain • Severe dizziness, fainting, or lightheadedness • Severe constipation or stomach-area (abdominal) pain • Extreme fatigue • Irregular heartbeat or chest pain • Muscle spasm, twitches, tremors, or cramps • Numbness or tingling in your fingers or toes • Nausea, vomiting, or loss of appetite • Seizures
--	--

Select Rare Side Effects

Side Effect	Talk to Your Care Team if You Have Any of These Signs or Symptoms
Risk of New Cancers (Boxed Warning)	There is a risk of developing one or more new cancers during or after treatment. Talk with your care team about this risk, and ask about the signs and symptoms to watch for.
Stomach Problems	Stomach problems including intestinal bleeding, a tear in your intestinal wall (perforation) or stomach ulcers can happen in people who take mycophenolate. Bleeding can be severe, and you may have to be hospitalized for treatment.³ • Severe pain or tenderness in your stomach area (abdomen) • Swelling of the abdomen • Fever of 100.4°F (38°C) or higher • Chills • Nausea • Vomiting • Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine)
Acute Inflammatory Syndrome	Acute inflammatory syndrome is a serious inflammatory reaction that may occur within weeks to months after starting or changing doses of mycophenolate. Talk with your care team about this risk and if you experience the following signs or symptoms: • Fever • Muscle pain • Joint pain • Arthritis
Allergic Reactions, Including Anaphylaxis and Infusion-Related Reactions	Get emergency medical help right away if you develop any of the following signs or symptoms: • Swelling of your lips, mouth, tongue, or throat • Trouble breathing or swallowing • Raised red areas on your skin (hives) • A very fast heartbeat • You feel dizzy or faint

Before starting treatment, ask your care team when to call 9-1-1 or seek emergency help.
If you experience any new, worsening, or uncontrolled side effects, contact your care team immediately.

Intimacy, Pregnancy, and Breastfeeding

- Treatment may **change how you feel about intimacy and your body**. However, physical closeness—such as holding hands and hugging—remains safe. It is common to have questions about intimacy. If needed, talk to your care team for guidance.
- **Boxed Warning:** Treatment may **harm an unborn baby**.
 - If you are able to become pregnant
 - Your care team must talk with you about acceptable birth control methods (contraceptive counseling) to use while taking mycophenolate. You should have 1 pregnancy test immediately before starting mycophenolate and another pregnancy test 8 to 10 days later. Pregnancy tests should be repeated during routine follow-up visits with your care team. Talk to your care team about the results of all of your pregnancy tests.
 - Use an effective method of birth control during treatment and for 6 weeks after your last dose of mycophenolate.
 - If you think you might be pregnant or if you become pregnant, tell your care team right away.
 - If your partner is able to become pregnant, use an effective method of birth control—such as condoms—during treatment and for 90 days after your last dose of mycophenolate.
- It is **not known** if mycophenolate is present in **breast milk**. Talk with your care team if you are breastfeeding or plan to breastfeed.

Additional Information

- **Tell your care team about all the medicines you take.**

This includes prescriptions, over-the-counter drugs, vitamins, and herbal products. Before starting any new medicine, supplement, or vaccine, ask your care team first.

- **You should not receive a “live vaccine”** before, during, or after treatment, until your care team tells you it is okay. If you are not sure about the type of immunization or vaccine, ask your care team. These vaccines may not be safe or may not work as well during treatment.
- **Especially tell your care team if you take:**
 - Birth control pills (oral contraceptives)
 - Sevelamer (Renagel, Renvela). These products should be taken at least 2 hours after taking mycophenolate
 - Acyclovir (Zovirax), valacyclovir (Valtrex), ganciclovir (Cytovene-IV, Vitrasert), valganciclovir (Valcyte)
 - Rifampin (Rifater, Rifamate, Rimactane, Rifadin)
 - Antacids that contain magnesium and aluminum (Mycophenolate and the antacid should not be taken at the same time)
 - Proton pump inhibitors (PPIs) (Prevacid, Protonix, Nexium)
 - Sulfamethoxazole/trimethoprim (Bactrim, Bactrim DS)
 - Norfloxacin (Noroxin) and metronidazole (Flagyl, Flagyl ER, Flagyl IV, Metro IV, Helidac, Pylera)
 - Ciprofloxacin (Cipro, Cipro XR, Ciloxan, Proquin XR) and amoxicillin plus clavulanic acid (Augmentin, Augmentin XR)
 - Azathioprine (Azasan, Imuran)
 - Cholestyramine (Questran Light, Questran, Locholest Light, Locholest, Prevalite)

- **Tell your care team about all your health problems.** This includes if you have Lesch-Nyhan syndrome, Kelley-Seegmiller syndrome, or another rare inherited deficiency hypoxanthine-guanine phosphoribosyl-transferase (HGPRT). You should not take mycophenolate if you have one of these disorders.
- **You should not donate blood** while taking mycophenolate and for at least 6 weeks after stopping mycophenolate.
- **You should not donate sperm** while taking mycophenolate and for 90 days after stopping mycophenolate.
- **Mycophenolate can make you feel dizzy.** Do not drive or operate machinery until you know how mycophenolate affects you.
- **Phenylalanine can be harmful to patients with phenylketonuria (PKU).** Cellcept oral suspension contains aspartame, a source of phenylalanine. Talk with your care team about this risk and if you have a history of PKU.
- **This Patient Education Sheet may not describe all possible side effects.**
Call your care team for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.

Notes

Updated Date: July 27, 2026

Scan the QR code below to access this education sheet.

**Important Notice:**

The Association of Cancer Care Centers (ACCC), Hematology/Oncology Pharmacy Association (HOPA), Network for Collaborative Oncology Development & Advancement, Inc. (NCODA), and Oncology Nursing Society (ONS) have collaborated to gather information and develop this patient education guide. This guide is a summary of the medication, based on information provided by the drug manufacturer and other sources.

This guide does not cover all information available on the possible uses, directions, doses, precautions, warnings, interactions, adverse effects, or risks associated with this medication. It should not be used as a substitute for the advice of a qualified healthcare professional. The provision of this guide is for informational purposes only. It does not constitute or imply endorsement, recommendation, or favoring of this medication by ACCC, HOPA, NCODA, or ONS, who assume no liability for and cannot ensure the accuracy of the information presented. All decisions regarding this medication should be made with the guidance and direction of a qualified healthcare professional.

Permission:

Patient Education Sheets are provided as a free educational resource for patients with cancer and their caregivers in need of concise, easy-to-understand information about cancer therapy. Healthcare providers may copy and distribute the sheets to patients and direct them to the Patient Education Sheets website. However, commercial reproduction or reuse, as well as rebranding or reposting of any type, are strictly prohibited without permission of the copyright holders. Permission requests, including direct linking from Electronic Health Records, and licensing inquiries should be emailed to patienteducationsheets@ncoda.org.

Copyright © 2026 by Network for Collaborative Oncology Development & Advancement, Inc. All rights reserved.

PES-652