

Programme

Current Issues in the Management of Paediatric Transplant Recipients

Chair: Lothar Zimmerhackl, MD

18:30–18:35 Welcome and Introduction
Lothar Zimmerhackl, MD

18:35–18:50 Current Issues in Paediatric Transplantation
Deirdre Kelly, MD

18:50–19:05 Treatment Strategies in Paediatric Transplant Recipients with Calcineurin Inhibitor Nephrotoxicity
Burkhard Tönshoff, MD

19:05–19:20 Value of Therapeutic Drug Monitoring in Paediatric Transplantation
Guido Filler, MD

19:20–19:30 Discussion



“I am Luca and happy that my friend is healthy”

invitation
Satellite Symposium

CellCept[®]
mycophenolate mofetil

Proven Protection for the Long Term



Current Issues in the Management of Paediatric Transplant Recipients

Satellite Symposium at the International Pediatric Transplant Association (IPTA) 3rd World Congress



Monday 8 August 2005
18:30–19:30
Congress Centre Innsbruck
Innsbruck, Austria



CellCept[®]
mycophenolate mofetil

Proven Protection for the Long Term



“Hi, I am Silvy and I am healthy”

Welcome

Certain of the problems faced post-transplantation, such as rejection, infection and toxicities of certain immunosuppressive regimens, apply to both adult and paediatric patients. However, there are many specific issues in paediatric transplant populations, including differences in life style, lower body weight, and different responses to immunosuppressive agents. Extrapolation of results from adult studies to children is not possible, thus demanding specific approaches to paediatric patient care.

This satellite symposium on paediatric transplantation will address some of the current issues faced by paediatric transplant recipients and their physicians, and aims to provide clinical and practical information regarding how to improve patient care, ultimately leading to longer and healthier lives of children with transplants.

Faculty

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Abridged Product Information

Qualitative and quantitative composition. CellCept 500 mg powder for concentrate for solution for infusion: Each vial contains the equivalent of 500 mg mycophenolate mofetil (as hydrochloride salt). CellCept 250 mg capsules: Each capsule contains 250 mg mycophenolate mofetil. CellCept 1 g/5 ml powder for oral suspension: Each bottle contains 35 g mycophenolate mofetil in 110 g powder for oral suspension. 5 ml of the constituted suspension contains 1 g of mycophenolate mofetil. CellCept 500 mg tablets: Each tablet contains 500 mg mycophenolate mofetil.

Therapeutic indications. CellCept 500 mg powder for concentrate for solution for infusion is indicated in combination with cyclosporin and corticosteroids for the prophylaxis of acute transplant rejection in patients receiving allogeneic renal or hepatic transplants. CellCept 250 mg capsules, CellCept 1 g/5 ml powder for oral suspension and CellCept 500 mg tablets are indicated in combination with cyclosporin and corticosteroids for the prophylaxis of acute transplant rejection in patients receiving allogeneic renal, cardiac or hepatic transplants.

Contraindications. CellCept 500 mg powder for concentrate for solution for infusion: Allergic reactions to CellCept have been observed. Therefore, CellCept is contraindicated in patients with a hypersensitivity to mycophenolate mofetil or mycophenolic acid. CellCept 500 mg powder for concentrate for solution for infusion is contraindicated in patients who are allergic to polysorbate 80. For information on use in pregnancy and contraceptive requirements see officially published SPC section 4.6 Pregnancy and lactation. CellCept 250 mg capsules, CellCept 1 g/5 ml powder for oral suspension and CellCept 500 mg tablets: Allergic reactions to CellCept have been observed. Therefore, CellCept is contraindicated in patients with a hypersensitivity to mycophenolate mofetil or mycophenolic acid. For information on use in pregnancy and contraceptive requirements see officially published SPC section 4.6 Pregnancy and lactation.

List of excipients. CellCept 500 mg powder for concentrate for solution for infusion: Polysorbate 80, citric acid, hydrochloric acid and sodium chloride. CellCept 250 mg capsules: Pregelatinised maize starch, croscarmellose sodium, polyvidone (K-90) and magnesium stearate. The capsule shells contain gelatin, indigo carmine (E132), yellow iron oxide (E172), red iron oxide (E172), titanium dioxide (E171), black iron oxide (E172) potassium hydroxide, shellac. CellCept 1 g/5 ml powder for oral suspension: Sorbitol; silica, colloidal anhydrous; sodium citrate; soybean lecithin; mixed fruit flavour; xanthan gum; aspartame (E951); methyl parahydroxybenzoate (E218); and citric acid, anhydrous. Aspartame contains phenylalanine equivalent to 2.78 mg/5 ml of suspension. CellCept 500 mg tablets: Microcrystalline cellulose, polyvidone (K-90), croscarmellose sodium and magnesium stearate. The tablet coating consists of hydroxypropyl methylcellulose, hydroxypropyl cellulose, titanium dioxide (E171), polyethylene glycol 400, indigo carmine aluminium lake (E132), and red iron oxide (E172).

Marketing authorisation holder. Roche Registration Limited, 40 Broadwater Road, Welwyn Garden City, Hertfordshire, AL7 3AY, United Kingdom.

Prescription Status. Medicinal product subject to medical prescription.

Pharmacotherapeutic group. Immunosuppressant.

Special warnings and special precautions for use, interaction with other medicinal products and other forms of interaction and undesirable effects see officially published SPC.