

Letter to Dental Provider

To Whom It May Concern,

Our mutual patient noted above has received a kidney transplant. From the kidney transplant perspective, we do not have any antibiotic prophylaxis that we recommend before dental procedures.

This is based on a lack of evidence of benefit for prophylactic antibiotics for kidney transplant patients, and the potential harm from inappropriate use of antibiotics, Please see *J Can Dent Assoc 2012; 78:c5* from the Canadian Dental Association for reference.

We defer the need for antibiotics to your judgement – depending on the patient’s comorbidities, the type of dental procedure, and findings at the time of the dental procedure. As a kidney transplant recipient per say there are no contraindications for dental procedures We also defer the choice of anesthetic to you.

If you have questions regarding antibiotics that you may want to prescribe, please contact our clinic. We are happy to provide guidance regarding drug interactions for our transplant patients. We have also attached a list of antibiotics and pain medications that have common drug interactions with transplant medications.

Sincerely yours,



Dr. Ramesh Prasad

Dr. Jeffrey Zaltzman

Dr. Darren Yuen

Dr. Ann Young



Tess Montada-Atin NP

**Common drug interactions with transplant medications
 (cyclosporine (CSA), tacrolimus (TAC), and sirolimus)**

Antibiotics	Aminoglycosides (amikacin, gentamicin, tobramycin)	Additive nephrotoxicity	Avoid unless benefit >> risk; Monitor serum creatinine
	Caspofungin	↓ TAC levels (tacrolimus only)	Monitor TAC level closely following addition, dose change, or discontinuation
	Clarithromycin, erythromycin	↑ CSA/TAC/sirolimus levels, increased risk of toxicity	Avoid combination due to potential for dangerously high CSA/TAC/sirolimus levels
	Rifampin, rifabutin	↓ CSA/TAC/sirolimus levels, increased risk of rejection	Consult ID physician; Monitor CSA/TAC/sirolimus levels; Dose adjustment often required
	Vancomycin	Additive nephrotoxicity	Avoid unless benefit >> risk; Monitor serum creatinine
Pain medications	NSAIDs (e.g. ibuprofen, naproxen), COX-2 inhibitors	Additive nephrotoxicity	Recommend acetaminophen for over-the-counter pain management; Topical Voltaren may be used for short periods