

Myhibbin (mycophenolate mofetil) - New drug approval

- On May 1, 2024, the <u>FDA approved</u> Liqmeds Worldwide's <u>Myhibbin (mycophenolate mofetil)</u> oral suspension, for the prophylaxis of organ rejection, in adult and pediatric recipients 3 months of age and older of allogeneic kidney, heart or liver transplants, in combination with other immunosuppressants.
- Mycophenolate is available in several other formulations for transplant medicine, including as an injection, oral capsule, oral tablet, and oral suspension.
- Myhibbin carries a boxed warning for embryo-fetal toxicity, malignancies, and serious infections.
- Additional warnings and precautions for Myhibbin include blood dyscrasias: neutropenia and pure
 red cell aplasia; gastrointestinal complications; patients with hypoxanthine-guanine
 phosphoribosyl-transferase deficiency; acute inflammatory syndrome associated with
 mycophenolate products; immunizations; blood donation; semen donation; effect of concomitant
 medications on mycophenolic acid concentrations; and potential impairment of ability to drive or
 operate machinery.
- The most common adverse reactions (≥ 20%) with Myhibbin use were diarrhea, leukopenia, infection, vomiting, and there is evidence of a higher frequency of certain types of infections eg, opportunistic infection.

Population	Dosage
Adults	
Kidney transplant	1 g orally twice daily
Heart transplant	1.5 g orally twice daily
Liver transplant	1.5 g orally twice daily
Pediatrics	
Kidney transplant	600 mg/m ² orally twice daily, up to maximum of 2 g daily
Heart transplant	600 mg/m² orally twice daily (starting dose) up to a maximum of 900 mg/m² twice daily (maximum daily dose of 3 g or 15 mL of oral suspension)
Liver transplant	600 mg/m² orally twice daily (starting dose) up to a maximum of 900 mg/m² twice daily (maximum daily dose of 3 g or 15 mL of oral suspension)

Liqmeds Worldwide's launch plans for Myhibbin are pending. Myhibbin will be available as a 200 mg/mL oral suspension.



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