

Medication	Pre-transplant use based on Child Pugh cirrhosis			Post-transplant use			
	A	B	C	Interaction with IS**	DILI†**	Renal dose adjustment	Common adverse events
Orlistat	Yes	Yes	Yes	Decreases calcineurin inhibitor concentration	Rare	None	Nausea, abdominal cramps, fecal urgency
Phentermine-topiramate	Yes	Dose reduction	Avoid use	None	Unlikely	Dose reduction if creatinine clearance <50; avoid in ESRD**	Dry mouth, constipation, insomnia, paresthesia
Naltrexone-bupropion	Dose reduction	Dose reduction	Dose reduction	None	Unlikely	Dose reduction if moderate/severe impairment; avoid in ESRD	Nausea, headache, constipation
Liraglutide	Yes	Yes	Yes	None	Unlikely	None	Nausea, diarrhea
Cardamom	NA	NA	NA	None	None	NA	None
Curcumin	NA	NA	NA	Possibly with tacrolimus	Rare	NA	None
Carnitine	NA	NA	NA	None	None	NA	Mild nausea and diarrhea

Guidance for using weight-loss medications\* or alternative medicines in patients with cirrhosis and liver transplant recipients. \*Largely based on manufacturer recommendation. †Based on the LiverTox national database. \*\*Abbreviations: IS, immunosuppression; DILI, drug-induced liver injury; ESRD, end-stage renal disease; NA, not available. Table adapted with permission from Hepatology.