

Supplementary Table 1: *In vitro* and clinical evidences for association between *UGT* and *ABCC2* SNPs and MMF pharmacokinetics

<i>Genes</i>	<i>SNP</i>	<i>In vitro</i> evidence	<i>Clinical</i> evidence				
			PK effect	Type of patients (n; ethnicity)	Time after transplantation	Comedication	Reference
<i>ABCC2</i>	C-24T	none	↑ dose-corrected MPA trough levels and AUC _{0-12h}	Renal transplants (n=95; Caucasians)	42, 90, 360 days	Tacrolimus	(1)
<i>UGT1A9</i>	C-2152T and/or T-275A	↑ enzyme expression and MPA glucuronidation rates (2)	↓ MPA AUC _{0-12h}	Renal transplants receiving <u>2g MMF b.i.d</u> ^a (n=32; Caucasians)	7 days	Tacrolimus	(3)
				Renal transplants (n=163; 88% Caucasians, 3% Blacks, 4% Asians, 5% unknown)	3 days	Tacrolimus ^b	(4)
				↓ dose-corrected MPA trough levels	Renal and/or pancreas transplants (n=55; 90% Caucasians, 2% African American, 2% asian, 2% Vietnamese, 4% Indian American)	< 30 days	Cyclosporine ^c
	C-440T/T-331C	↑ MPA glucuronidation rates (2)	↓ dose-corrected MPA AUC _{0-12h}	Renal transplants (n=40; Caucasians)	6 months	Cyclosporine	(6)

UGT1A9	T98C	↓ enzyme affinity for MPA (7)	↑ MPA AUC _{0-12h}	Renal transplants (n=63; Caucasians ; n=2 heterozygous patients for the T98C SNP)	7 days	Tacrolimus	(3)
			↑ MPA AUC _{0-12h}	Renal transplants (n=338; 88% Caucasians, 3% Blacks, 4% Asians, 5% unknown)	< 1 year	Tacrolimus (n=163); Cyclosporine (n=175)	(4)
			↑ MPA AUC _{0-12h}	Healthy volunteers (n=22; 94% Caucasians, 4% Arabic, 2% Hispanic)	-	-	(8)
UGT1A8	C518G	none	↑ dose-corrected MPA trough levels	Renal and/or pancreas transplants (n=40; 38 Caucasians, 1 African American, 1 Asian)	< 30 days	Tacrolimus ^d	(5)
			↑ MPA AUC _{0-12h}	Renal transplants (n=175; 88% Caucasians, 3% Blacks, 4% Asians, 5% unknown)	< 1 year	Cyclosporine ^e	(4)

^a no association in patients receiving 1g MMF b.i.d. (n=63);

^b no association in patients cotreated with cyclosporine (n=175).

^c no association in patients cotreated with tacrolimus (n=40) or receiving MMF only (n=22);

^d no association in patients cotreated with cyclosporine (n=55) or receiving MMF only (n=22);

^e no association in patients cotreated with tacrolimus (n=163).

References for Supplementary Table 1

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