



METHOTREXATE

What are the aims of this leaflet?

This leaflet has been written to help you understand more about methotrexate. It tells you what it is, how it works, how it is used to treat skin conditions, and where you can find out more about it.

What is methotrexate and how does it work?

Methotrexate is a drug that acts by slowing down the production of new cells by the body's immune system. It was used first, in high doses, to treat cancer, but was found to be an effective treatment for skin and joint diseases at much lower doses than those used for treating cancer. Methotrexate can reduce inflammation and in this way can help treat chronic diseases. One of its other actions is to reduce the activity of the immune system (the body's own defence system), so it is always used with care.

Which skin conditions are treated with methotrexate?

Methotrexate is used to treat psoriasis, psoriatic arthritis, and several other types of skin problems including: pemphigoid, pemphigus, sarcoidosis, scleroderma, dermatomyositis and eczema.

How long will I need to take methotrexate before it has an effect?

Methotrexate does not work immediately. It may be 3-12 weeks before you notice any benefit.

When should I take methotrexate?

Methotrexate is usually taken in tablet form **ONCE A WEEK**, on the same day each week. **It should never be taken everyday.** The tablets are taken with food and should be swallowed whole and not crushed or chewed.

Methotrexate may also be given once a week by injection - either subcutaneous (an injection under the skin, like insulin injections for diabetes), or intramuscular (in the buttocks or thigh).

The 2.5 mg tablets are the ones most recommended for use, as this allows for flexibility in the dose. They should not be confused with 10 mg tablets, which can look similar. Care should be taken to ensure that the correct strength has been prescribed and dispensed. You must **always** check the dose and strength **before** taking methotrexate.

If you miss taking methotrexate on your normal day, you can take it the following day or two; however, if you are more than three days late, avoid it that week. In both cases, take your next dose on the usual day next week.

What dose should I take?

Your doctor will advise you on the dose, and should give you a test dose (usually 2.5 to 5 mg) 1 week before starting regular treatment. For severe psoriasis, the usual dose is 10-25 mg (sometimes up to 30 mg) orally, once weekly. This should be adjusted according to your response to treatment and side effects. Some patients are given methotrexate by injection.

What are the possible side effects of methotrexate?

In some patients methotrexate can cause nausea, diarrhoea or mouth ulcers. Hair loss and rashes are rare with the low dose of methotrexate used to treat psoriasis. Taking methotrexate can affect the blood count (one of the effects is that fewer blood cells are made) and so can make you more likely to develop infections.

You should see your doctor if:

- You develop a sore throat or any other infection
- You have a fever
- You develop unexplained bruising or bleeding
- You develop any new symptoms after starting methotrexate

Folic acid is frequently recommended as a vitamin supplement that may reduce the incidence of side effects. Practice varies, and it is important to follow your doctor's recommendation.

If you have not had chicken-pox, but come into contact with someone who has chicken-pox or shingles, or if you develop chicken-pox or shingles while

you are taking methotrexate, you should see your doctor **immediately** as you may need special treatment.

Are there any other side effects if methotrexate is taken for a long time?

Rarely methotrexate causes inflammation of the lung with breathlessness. If you become breathless, you must see your doctor **immediately**.

Long-term methotrexate can increase the risk of cirrhosis of the liver, particularly if there are other factors such as drinking alcohol.

How will I be monitored for the side effects of methotrexate treatment?

Because methotrexate can affect the blood count, and sometimes causes liver problems, your doctor will arrange for you to have regular blood checks while you are taking it. You **must not** take methotrexate unless you are having these regular blood checks. They are done weekly when the dose is being changed, and not less often than every 2-3 months when the dose is stable.

Signs of infection such as a sore throat, mouth ulceration, diarrhoea and sensitivity to sunlight, may signal too much methotrexate. These symptoms should be reported immediately and investigated.

The effects of methotrexate on the liver are checked in these blood tests, and sometimes (infrequent) liver biopsies are required to monitor these effects too.

The BAD Biologic Interventions Register (BADBIR)

If you have been prescribed methotrexate for treatment of your psoriasis, you may be asked to take part in the national biologics register. This register is to compare the safety of different treatments for psoriasis and to see how well they work. It was set up to monitor some new treatments for psoriasis called biological treatments. The register will give doctors information on how best to use the treatments available for moderate to severe psoriasis. No information will be passed to the register without your informed consent.

Can I have vaccinations whilst on methotrexate?

It is recommended that you should not be immunized using any of the 'live' vaccines such as polio, rubella (German measles) and yellow fever. An 'inactivated' polio vaccine can be given instead of the 'live' one and the

'inactivated' version should also be given to people you are in close contact with, such as members of your household.

If you are on methotrexate you should avoid contact with children who have been given the 'live' polio vaccine, for 4-6 weeks after the vaccination. Yearly 'flu vaccines and Pneumovax are safe and recommended (see PIL on [Immunisations](#)).

Does methotrexate affect fertility or pregnancy?

Methotrexate can reduce fertility and it is likely to harm an unborn baby, so it **must not** be taken during pregnancy. While on methotrexate, and for at least 3 months, and preferably for 6 months, after the methotrexate has been stopped, both women and men should take contraceptive precautions.

If you are planning a family, or if you become pregnant while on methotrexate, you must discuss this with your doctor as soon as possible. You must not breast feed if you are taking methotrexate.

May I drink alcohol while I am taking methotrexate?

Alcohol does interact with methotrexate. Both alcohol and methotrexate can damage the liver, so it is advisable to keep alcohol consumption to an absolute minimum.

Can I take other medicines at the same time as methotrexate?

Some drugs interact with methotrexate, so you should always let any doctor treating you know that you are taking methotrexate. Special care is needed with non-steroidal anti-inflammatory drugs such as aspirin and ibuprofen. You should only take anti-inflammatory drugs if your doctor prescribes them for you. Do not take 'over-the-counter' preparations without discussing this first with your doctor, nurse or pharmacist. You should also avoid antibiotics containing trimethoprim.

Where can I find out more about methotrexate?

If you want to know more about methotrexate, or if you are worried about your treatment, you should speak to your doctor or pharmacist. This information sheet does not list all of the side effects of methotrexate. For fuller details, look at the drug information sheet which comes as an insert with your prescription for methotrexate.

Web links to detailed leaflets:

www.dermnetnz.org/treatments/methotrexate.html

This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists: its contents, however, may occasionally differ from the advice given to you by your doctor.

This leaflet has been assessed for readability by the British Association of Dermatologists' Patient Information Lay Review Panel

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