

# Weekly methotrexate tablets

## Information to read before you start treatment

This information sheet has been given to you to help answer some of the questions you may have about methotrexate. It is in addition to the information found in the leaflet inside the tablet packet. Please make sure you read both leaflets carefully. If you have any questions and concerns, please do not hesitate to speak to a doctor, pharmacist or nurse caring for you.

### What is methotrexate?

Methotrexate is a type of medicine called an immunosuppressant. This means it lowers the body's immune system. The immune system is important in fighting infections, but sometimes immune system cells attack the body's own tissues and trigger long term inflammation. Methotrexate reduces inflammation caused by your condition by dampening down the activity of these cells in the immune system.

Methotrexate is used to treat a number of inflammatory conditions including rheumatoid arthritis, psoriasis, eczema, inflammatory bowel diseases and inflammatory diseases of the eye. It is not a painkiller, but as a result of reducing the inflammation caused by your condition, you may notice a reduction in pain.

At higher doses, it is used to treat some kinds of cancer.

Once you start taking methotrexate, it can take several weeks before you notice any benefits to your condition. It is important that you continue treatment even if you do not feel any benefit during the first 12 weeks - it is likely that the methotrexate is working. Methotrexate cannot cure your condition and you may need to take it for several years to keep your symptoms controlled.

### What happens before I start methotrexate?

Some patients with kidney, lung, bone marrow or liver problems may not be able to take methotrexate, so before you start treatment you will need blood tests to check your liver, kidney and blood function. You may be asked to have a chest X-ray and occasionally, a breathing test to check your lungs. Patients may also need to be tested for undiagnosed infections (including viral infections) as these can worsen whilst taking methotrexate. If you contract chicken pox or shingles (varicella zoster virus) while taking methotrexate it can make you unwell, so you may also be tested to see if you are immune to this virus and may require vaccines for this beforehand.

These pre-treatment tests are used to check if methotrexate is a suitable treatment for you. For women it is important to make sure you are not pregnant before starting treatment; if you are unsure you will be required to take a test.

## What if I take other medicines before starting treatment?

You will be asked if you take any medications prescribed by your GP or if you take any vitamins, supplements, over-the-counter, herbal or homeopathic medicines. This is because methotrexate can interact with some medicines and supplements. Please bring all your medicines and any medication lists (such as a GP repeat prescription form) when you come into hospital.

## Why do I also need to take folic acid?

Folic acid has been shown to reduce some of the side effects of methotrexate (including liver and stomach side effects). You will therefore be given folic acid tablets while you are taking methotrexate treatment.

## How do I take the methotrexate tablets?

Methotrexate tablets should be taken by mouth as a **single dose, once a week** on the same day each week. **It must never be taken more than once a week.**

Depending upon how well the methotrexate works for you, the dose you need to take may change. If your dose changes, the number of tablets you should take will change but you will still only need to take them once a week.

**Important: always check the dose of your methotrexate and the strength of the tablets supplied.**

Methotrexate comes in 2.5mg (milligram) tablets (usually pale yellow round-shaped tablet) and 10mg tablets (usually pale yellow oval-shaped tablet). Guy's and St Thomas' NHS Foundation Trust only supply 2.5mg tablets. Most GPs should also only prescribe you 2.5mg tablets, but it is possible that your GP may prescribe you the 10mg tablets. If possible, you should ask your GP to only prescribe you 2.5mg tablets to prevent any confusion. Always make sure you know which tablets you have been given before you take them home.

Always check the strength and dose of your methotrexate tablets. Do not take the tablets if you think you have the wrong strength. Too high a dose can cause serious side effects (see page three). Check with your doctor or pharmacist as soon as possible if you think that you have been given the wrong dose or taken too much. Do not take any methotrexate until you are sure that the dose is what your doctor intends.

## How do I take the folic acid tablets?

Folic acid tablets should be taken orally (by mouth). The person who prescribes this for you will let you know how many to take and when to take them. Do not take your folic acid tablets on the same day as your weekly methotrexate dose, as this may prevent you getting the full benefit from your treatment.

Folic acid comes in 5mg tablets (usually deep yellow round-shaped tablet).

Methotrexate and folic acid tablets can look similar and it is very important to distinguish between the two. Always keep them in their individual original containers.

## What should I do if I forget to take the methotrexate?

If you forget to take your methotrexate don't worry. You can take it the following day or two. For example, if your normal day is Tuesday, you can take it on Wednesday or Thursday. This will become the new day of the week to take future doses. Do not take the dose if you are three or more days late without discussing with your doctor or clinical nurse specialist. A flare-up of the disease during this time is unlikely. **Never double up on your dose.**

## What should I do if I forget to take the folic acid?

If you forget to take your folic acid don't worry. You can take it when you remember, any day of the week, except the day of your methotrexate dose. Always take methotrexate and folic acid on different days.

## What should I tell my doctor or specialist nurse?

Methotrexate is a safe and effective treatment when monitored carefully. However, stop taking methotrexate and tell your doctor or specialist nurse immediately:

- if you develop any of the potentially serious side effects listed in the section below.
- if you develop (or come into contact with any person with) chickenpox or shingles
- if you think you have taken more than your prescribed dose

## Are there any side effects?

Many people take methotrexate without any problems. Some people experience rare but important side effects. Some of the side effects happen immediately, but others can take a few weeks to develop. The patient information leaflet in your tablet packet has a more detailed list of possible side effects and details of what to do if they occur. Tell your doctor if these symptoms persist or if they re-occur after every dose.

**Potentially serious side effects** are rare (affect between one in 1,000 and one in 10,000 patients). You should **stop taking methotrexate and tell your doctor or specialist nurse immediately** if you develop any of the following:

- frequent fevers, chills, sore throat or infections (signs of bone marrow damage)
- bruising very easily (may be a sign of bone marrow damage)
- bleeding very easily, including nose or gums (may be a sign of bone marrow damage)
- chest pain or breathlessness (may be a sign of fibrosis of the lung)
- long term dry cough (may be a sign of fibrosis of the lung)
- yellowing discolouration of the skin or whites of your eyes (signs of liver problems)
- long-term dark urine (sign of liver problems)
- severe nausea, vomiting or stomach discomfort (signs of liver problems)
- severe itching of the skin (may be signs of liver problems)

- severe and continuing diarrhoea or vomiting (risk of harm from dehydration)
- severe or blistering rash or ulcers (this can also be in your mouth or on your tongue) (possibly a result of decreased folate levels)
- if you are female, soreness or ulcers of the vagina (possibly a result of decreased folate levels).

## What if I vomit?

If you vomit within a few hours of taking methotrexate, tell your GP (or specialist nurse by calling the helpline telephone number on the back page). You may be told to take another dose or to wait until the next dose is due the following week. Do not take another dose unless you have been advised to do so by your doctor or nurse.

Patients who regularly vomit after a dose may be asked to increase their folic acid dose or be given anti-sickness tablets. If these do not work, methotrexate may be given by injection, or another type of treatment tried instead.

## Why do I need regular blood tests?

The tests tell your doctor if the methotrexate is causing side-effects. If your blood, liver, kidneys or lungs are being affected, your treatment will be changed. Blood tests also show whether the methotrexate is working. Your doctor may increase or decrease the number of tablets you take at each dose depending upon the results of your tests.

When you start taking methotrexate, your doctor or specialist nurse will give you a booklet in which the results of your blood tests must be recorded. It is important that this booklet is kept up to date with your latest dose and blood results, and that you take it to any appointments with your hospital doctors, GP, pharmacist, dentist, or other healthcare providers. If you did not receive a booklet, ask your hospital clinic for a copy.

It is important that you do not miss your blood test, and you must not take methotrexate unless you are having regular blood tests. Your doctor will advise you how often they will be done, but they are usually between every two and 12 weeks depending on how stable your blood results are. In general, try to avoid having blood tests done directly after taking your dose, since any changes caused by the previous dose may be misinterpreted.

## What if I need to start taking other medicines after my treatment has started?

Always check with your doctor or pharmacist before taking any other medicine. This includes medicines you can buy at a petrol station, newsagent, supermarket or chemist such as aspirin, ibuprofen, other painkillers, and medicines for coughs, colds and flu. These can interact with methotrexate and affect your treatment. This also applies to herbal and alternative remedies. Prescribed treatments which may cause particular problems include acitretin, isotretinoin and phenytoin. Please check the patient information leaflet in your tablet pack for more information. You should be especially careful about taking the following drugs:

- **Aspirin** – Unless prescribed by your doctor, you must avoid aspirin and all aspirin-containing medicines. Many preparations for colds, flu, and pain relief contain aspirin. Always check with your pharmacist as to which products are suitable for you.
- **Non-steroidal anti-inflammatory drugs (such as ibuprofen)** – This group includes a number of drugs (including creams or ointments) that can be obtained with or without a prescription. They are used for joint disorders, as painkillers, to reduce fever and may be found in some cold remedies. Do not take these without talking to your hospital specialist or GP. For pain relief, paracetamol or codeine may be taken safely.
- **Certain antibiotics (especially those containing trimethoprim)** – Tell any doctor (or dentist) who prescribes you antibiotics that you take methotrexate.

Remember when you are buying medicines that sometimes the symptoms you are trying to treat may be a sign that methotrexate is not working safely or is harming you. If you are trying to treat any of the symptoms that may indicate a potentially serious side effect (see above), then you should stop taking methotrexate and contact your doctor or nurse immediately by calling the helpline (see back page).

## Does food affect methotrexate?

Methotrexate may reduce your ability to fight infection. There are some reports that bacteria (germs) found in food may cause a problem to those with a reduced ability to fight infections. These risks have not been directly linked with taking low dose methotrexate. However, it would be sensible to be cautious about food made from unpasteurised milk, such as soft cheese and uncooked meats such as some pâtés. Read food labels carefully and avoid eating these types of food regularly and be aware of food preparation and normal hygiene conditions in the handling of food.

## Can I drink alcohol during methotrexate treatment?

The manufacturers recommend that alcoholic drinks be avoided during methotrexate treatment. Methotrexate and alcohol may both cause liver damage. The risk of liver damage from methotrexate appears to be greater when it is used in the treatment of psoriasis than when it is used in individuals with rheumatoid arthritis. The risk is increased by alcohol. For psoriasis patients, if you are taking methotrexate, it is best to avoid alcohol altogether. You may wish to discuss this with the specialist treating you. If you decide that you still want to drink alcohol, you should ensure that your intake is within the maximum limits of 14 units of alcohol a week in total ensuring that some days are alcohol free.

## What if I am going travelling and need vaccinations?

While flu vaccines are safe, check with your doctor or nurse before receiving any other vaccines. If you plan to travel to an area that requires you to be vaccinated, or if you are in contact with a baby or young child undergoing a vaccination programme, ask your doctor or nurse for advice. Live vaccines (such as MMR, rubella, BCG, yellow fever or oral versions of typhoid and polio) should be avoided.

## Can I have a baby during methotrexate treatment?

Methotrexate may seriously harm the developing baby when taken during pregnancy. If you are sexually active, it is essential that you use a reliable form of contraception whilst taking methotrexate. Please ask your doctor or nurse if you would like further information. You should discuss with your consultant before trying to have a baby so that a careful plan can be made to alter your treatment.

- **Women** – Do not take methotrexate if you are pregnant or breastfeeding. It is recommended that you wait a minimum of three months after finishing your treatment, before trying to become pregnant. Should you become pregnant while on treatment, stop taking your methotrexate tablets immediately and arrange an appointment with your GP as soon as possible.
- **Men** – It is recommended that you wait a minimum of three months after finishing your treatment, before trying to father a child as your sperm can be affected. You should use effective contraception. Talk to your doctor or nurse if you need advice.

## Where can I get a repeat prescription?

You can obtain repeat prescriptions from your GP. If your dose changes at the hospital clinic, we may give you a hospital-only prescription to collect a two-week supply from the hospital pharmacy until we have notified your GP of the change, or you can take your prescription and monitoring booklet to your GP. Upon collecting your repeat prescription, you should show your monitoring booklet to the pharmacist.

## How do I dispose of any extra tablets when I have finished treatment?

If your treatment ends and you have some tablets left over, return them to any pharmacy. Do not flush them down the toilet or throw them away in your normal household waste.

## Who can I contact in emergencies or for urgent information?

If you require urgent information, call your GP or your clinic using the details found on the first page of the monitoring booklet. If it is out of office hours, call NHS 111 (details below). **If it is a medical emergency, go to your nearest Accident and Emergency department or call 999 if you require an ambulance.**

## Helplines

**Psoriasis Patients' Helpline:** Your specialist dermatology nurse can be contacted for any concerns or advice that you may require. It is the quickest way to get in touch with the dermatologists should you need to liaise with the doctors outside of your usual clinic appointments. Please call the helpline on **020 7188 7847** between 9am and 5pm, Monday to Friday (excluding Bank holidays). There is an answerphone service so please leave a message and we'll call you back.



**Inflammatory Bowel Disease (IBD) Patients' Helpline:** Your specialist IBD nurse can be contacted for any concerns or advice that you may require. It is the quickest way to get in touch with the gastroenterologists should you need to liaise with the doctors outside of your usual clinic appointments. Please call the helpline on **020 7188 2487** between 9am and 5pm, Monday to Friday (excluding Bank holidays). There is an answerphone service so please leave a message and we'll call you back.

**Rheumatoid Arthritis Patients' Helpline:** Your specialist rheumatology nurse can be contacted for any concerns or advice that you may require. It is the quickest way to get in touch with the rheumatologists should you need to liaise with the doctors outside of your usual clinic appointments. Please call the helpline on **020 7188 5896** between 9am and 5pm, Monday to Friday (excluding Bank holidays). There is an answerphone service so please leave a message and we'll call you back.

## Further sources of information

### Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

**t:** 020 7188 8748 9am to 5pm, Monday to Friday

### Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

**t:** 020 7188 8801 (PALS) **e:** [pals@gstt.nhs.uk](mailto:pals@gstt.nhs.uk)

**t:** 020 7188 3514 (complaints) **e:** [complaints2@gstt.nhs.uk](mailto:complaints2@gstt.nhs.uk)

### Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch:

**t:** 020 7188 8815 **e:** [languagesupport@gstt.nhs.uk](mailto:languagesupport@gstt.nhs.uk)

### NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

**t:** 111

### NHS Choices

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

**w:** [www.nhs.uk](http://www.nhs.uk)

### Get involved and have your say: become a member of the Trust

Members of Guy's and St Thomas' NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, and to become a member:

**t:** 0800 731 0319 **e:** [members@gstt.nhs.uk](mailto:members@gstt.nhs.uk) **w:** [www.guysandstthomas.nhs.uk/membership](http://www.guysandstthomas.nhs.uk/membership)

**Leaflet number: 2827/VER4**

Date published: May 2017

Review date: May 2020

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