

Methotrexate

Administration

Oral (or IM) Only prescribe 2.5mg tablet

Dose

5-15mg weekly in conjunction with Folic Acid 5mg daily except on days of Methotrexate.

Monitoring

FBC)
ESR) Every fortnight for 6 weeks and monthly
Creatinine) thereafter
LFTs)

Ensure:

1. Alcohol intake does not exceed recommended daily amount.
2. Adequate contraception whilst taking Methotrexate and for 6 months after stopping it
3. The following drugs are **not co-prescribed**:
 - a) folate antagonists such as: - Trimethoprim
Phenytoin
Pyrimethamine
 - b) Probenecid

In the event of:

1. Raised MCV
Check B12 and folate levels and alcohol consumption
2. Mouth ulcers
Try mouth wash. If severe stop Methotrexate
3. Nausea
Try anti-emetic or reduction in dose.

Stop Methotrexate if:

WBC < $4.0 \times 10^9/L$
Neutrophils < $2.0 \times 10^9/L$
Platelets < $120 \times 10^9/L$
Declining renal function i.e. creatinine increasing > 1.5 fold
Transaminase(s) rise(s) to more than 2 times baseline levels.
The patient reports new respiratory symptoms (e.g. coughing or dyspnoea)

If you decide to stop Methotrexate please contact us to discuss further management