



Concerning Treatment Using Methotrexate

Dosage forms: Tablets, 2.5 mg and injection pen

What is methotrexate?

Methotrexate is a chemical substance that slows the development of fast-growing cells (e.g., skin cells in psoriasis sufferers) and also inhibits certain blood cells that play a role in the body's immune system. Methotrexate has been used to treat psoriasis since the 1950s. The drug is also used to treat certain skin diseases that cause blistering, cases of severe eczema, psoriasis and patients with joint diseases such as psoriatic arthritis and rheumatoid arthritis. It is also used in cancer treatment, although in significantly higher doses.

Effects

As a rule, patients will see improvements after 4–6 weeks of treatment, although it may take up to 3–4 months to see the full effect. If the treatment works well, a patient can continue taking methotrexate for a number of years.

Dosage

You will take your tablets or injections only **once a week**. You must always take them on the same day of the week. Ordinarily, patients begin by taking 2–4 tablets, although this dose can often quickly be increased to six tablets (and possibly eight to ten tablets). Once the treatment has achieved good results, the dose can usually be lowered again. You can take the tablets in the evening before bedtime to help lessen any nausea you might experience. In exceptional cases, a patient can also divide their dose and take their tablets at 12-hour intervals over a 24-hour period.

If you are going to use injections, please look at www.medicininstruktioner.se for information or ask one of our nurses for help.

To reduce the risk of side effects, your treatment will be combined with folate (folic acid tablet, 5 mg). You should take this tablet 24 hours after taking your methotrexate tablets.

Testing and analysis

Before your treatment begins, we will collect blood samples from you to 1) analyse your blood cells and kidney and liver function, 2) screen for hepatitis and HIV and 3) run a pregnancy test for women. We will also collect a urine sample. We will need to collect blood samples to analyse your blood cells and kidney and liver function regularly throughout the course of your treatment according to a specific schedule, as follows: weeks 1, 3, 5 and 7 after treatment begins and then again in week 12. Following that, if everything looks good, every 3–6 months unless your doctor or nurse informs you otherwise. We will not contact you if your test results are normal.

It is very important that you follow this testing schedule so that we can detect any side effects and, in certain cases, stop the treatment. You must get tested before we can renew your prescription. It is best to take your tests 1–2 days before your next

methotrexate dose. It is important that you don't take your tests in the days immediately following a dose, since the results might then show higher levels than normal.

Follow-up

When starting systemic treatment, the effect must be evaluated after 3–4 months - then a tangible improvement should be seen. Sometimes, however, it can take up to 6 months before the full effect is achieved. When the treatment goals have been achieved, follow-up normally takes place annually. Follow-up can be done via a questionnaire that we send out via 1177 (alternatively by letter). If you get worse and the treatment is not working well, we want you to contact us.

Side effects

Any side effects that may occur fall mainly into one of two categories: 1) those that you notice and that are usually harmless and 2) those that show up in your blood tests. Any side effects you might experience will disappear if your dose is reduced or you stop taking the medication.

Most people experience no problems with their treatment. The most common side effects are mild stomach upset and nausea. Some patients might experience headaches or feel tired for a day or so after taking their medication. Patients might also experience an increased vulnerability to infection or mild hair loss, but this is rare. Effects on the liver in the form of elevated enzyme levels or a reduced number of blood cells (red and white blood cells and platelets) rarely cause unpleasant symptoms, but are detected first via blood tests.

In rare cases, patients might develop a dry cough, fever and breathing difficulties. If this happens to you, stop taking methotrexate and contact our dermatology clinic (Hudbehandling och dagsjukvård Sahlgrenska) immediately!

Further information

Pregnancy & breastfeeding: Methotrexate can harm unborn babies. Both women and men must stop taking methotrexate at least three months before they plan to conceive a child. Methotrexate must not be taken either during pregnancy or while breastfeeding.

Infections: You should pause your methotrexate treatment if you are suffering from an infection, although not in cases of mild infection, such as slight colds or cystitis. Contact the dermatology clinic for advice about this.

Vaccines: It is recommended that the influenza vaccine be taken annually. However, you must not receive any live vaccines while being treated with methotrexate. You are welcome to contact our dermatology clinic (Hudbehandling och dagsjukvård Sahlgrenska) should you need any advice about this.

Surgery: In most cases, you will not need to stop your methotrexate treatment due to surgery. However, you should always discuss the matter with the surgeon who will operate on you.

Other medications: Methotrexate can clash with other medications, including anti-inflammatory drugs known as NSAIDs (e.g., Naproxen, Naprosyn, Voltaren, Orudis, Ipren and others) and drugs containing acetylsalicylic acid (e.g., Treo, Magnecyl, Trombyl and



others). Medications containing acetylsalicylic acid should be avoided, except for Trombyl, which contains only a low dose, and can therefore be taken as usual. On the other hand, patients can usually continue taking NSAIDs as before, but should avoid taking them on the same day as methotrexate. Drugs containing paracetamol (e.g., Panodil and Alvedon) are fine to use.

There are also other medications that must not be combined with methotrexate.

Important! Whenever you come into contact with healthcare practitioners, always inform them that you are being treated with Methotrexate.

Alcohol: Use alcohol only in moderation and avoid it altogether, if possible. Alcohol affects the liver.

Contact

Hudbehandling och dagsjukvård Sahlgrenska +46 (0)31-342 11 12 (Telesvar answering service)

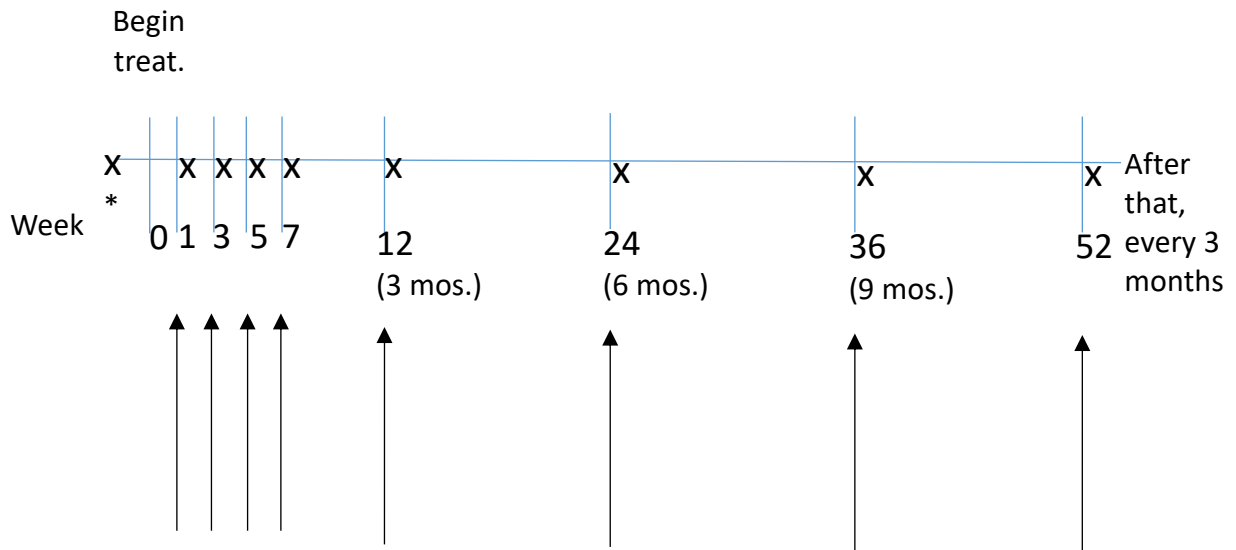
Sahlgrenska's switchboard (24 hrs.) +46 (0)31-342 10 00

You can also contact us via Healthcare Guide 1177's e-services at www.1177.se or at www.sahlgrenska.se

You can contact Healthcare Guide 1177 24 hours a day by calling 1177.



Testing Schedule for Methotrexate Treatment



You are responsible for booking your own appointment for testing on the weeks marked with an **X**.

Remember that it is best to take your tests 1–2 days before your next Methotrexate dose.

* Sample collected by a healthcare provider