

Methotrexate (Trexan®, Methotrexat®, Metoject®, Metoject Pen®)

Active substance

Methotrexate.

Mode of action

In psoriasis, cell division in the epidermis is disturbed. So-called immunosuppressive drugs, also known as cytostatic drugs, are used in an attempt to correct this disturbed action. Methotrexate belongs to this group of drugs. The positive effect often appears as early as during the first month of treatment.

Dosage

The medicine is available both as tablets and as injections. One tablet contains 2.5 mg or 10 mg methotrexate. The medicine is taken once a week, and the usual dose is 10–20 mg; however, the dose may be increased up to 30 mg as per doctor's instruction.

Incorrect daily dosage may lead to difficult adverse reactions. The medicine may also be given as injections if no effect has been obtained or if oral intake is made difficult by stomach irritation. To prevent potential side effects, 5 mg folic acid (Acid.Folic., vitamin B) is taken 3–5 hours after taking Trexan.

Method of administration

The tablets are taken with meals, with a lot of fluid. Dairy products may hamper the absorption of the drug, which is why they should be avoided two hours prior to and after the intake of the medicine. The medicine is always taken on the same day of the week. Methotrexate injections are given once a week by a public health nurse or by the patient.

Medications that can increase the risk of side effects and whose long-term use should be avoided when taking methotrexate are:

- trimethoprim
- sulfa-trimethoprim
- probenecid

On Trexan days:

Dairy-free diet two hours before and after intake of medicine (tablet). Salazopyrin is not taken at the same time with Trexan. Non-steroidal anti-inflammatory drugs (NSAIDs) are not taken at the same time; they are taken no earlier than 8 hours after taking Trexan. Pain medication that may be taken at the same time, if necessary, include Panacod, Panadol and Tramal.

Adverse effects

The most common adverse effect is nausea. Other, less common adverse effects are mucosal irritation (in the mouth, gums), sores, gastrointestinal problems such as diarrhoea and vomiting, and headache. The function of the bone marrow, liver, lungs and kidneys is monitored with blood and urine tests during treatment. If symptoms of infection (fever, cough etc.) appear during treatment, medical attention should be sought at a low threshold.

At high doses, bone marrow function may deteriorate. The production of blood cells may diminish (lower number of white blood cells (leucocytes) and blood platelets (thrombocytes)). Bruising without a clear cause may appear as a result of low blood platelet count.

Pregnancy and breastfeeding

The drug must not be used during pregnancy or breastfeeding. Make sure you use reliable contraception while taking the medication! The medication must be withdrawn no later than 3 months before a planned pregnancy. This recommendation applies to men as well. Alcohol use enhances the adverse effects of the medicine on the liver. Alcohol must be avoided on days when methotrexate is taken.

Follow-up

Safety tests are taken every 3 weeks for 2 months, and thereafter, every 2–3 months. Your doctor may have prescribed an individual safety testing regime for you that differs from the one below. Do not attend safety testing the day after you have taken your medication.

Safety tests

Before start of medication:

Basic blood count + neutrophils, ALT (liver function test), Creatinine (kidney function test), lung image (taken in the previous 12 months).

Every 3 weeks for 2 months:

Basic blood count + neutrophils and ALT

Every 3 months:

Basic blood count + neutrophils and ALT, Creatinine

NB!

Slight increases in ALT values (up to 100) are common and do not require withdrawal of the medication!