

Methotrexate (Trexan®, Nordimet®, Injexate®, Metoject Pen®)

Active substance

Methotrexate.

Mode of action

In psoriasis, cell division in the epidermis is disturbed. In moderate to difficult psoriasis, so-called immunosuppressive drugs (cytostatic), are used in an attempt to correct this disturbed action. Methotrexate also 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 methotrexate 2.5 mg or 10 mg and injectible is indifferent pre-measured dosages of 7,5 mg up to 30 mg. The medicine is taken/administered once per week in dosage that your doctor prescribes. (usually 10–20 mg)

Incorrect daily dosage may lead to difficult adverse reactions. To prevent potential side effects (nausea, stomach irritation), folic acid 5 mg (Acid.Folic., vitamin B) is usually prescribed for use 3–5 hours after taking Methotrexate.

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 or other close person.

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 Methotrexate days:

Dairy-free diet two hours before and after intake of medicine (tablet). Salazopyrin and non-steroidal anti-inflammatory drugs (NSAIDs) are not to be taken at the same time with Methotrexate. They can be taken no earlier than 8 hours after taking Methotrexate. Pain medication that are appropriate for use with Methotrexate, include Panacod, Panadol and Tramal.

Alcohol use enhances the adverse effects of the medicine on the liver. Alcohol must be avoided especially on days when methotrexate is taken.

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 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 6 months before a planned pregnancy. For men, recommended time of drug withdrawn is 1 month.

Follow-up

Safety tests are taken every 3, 6 and 12 weeks for 3 months, and thereafter, every 3-6 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. Usually, best time to take safety test is 1-2 days before the next application.

Safety tests

Before start of medication:

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

Every 3, 6 and 12 weeks for 3 months:

Basic blood count + neutrophils and ALAT

Every 3 months:

Basic blood count + neutrophils and ALAT, Creatinine

NB!

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