

Can I take other medicines along with methotrexate?

Some drugs interact with methotrexate so you should always let any doctor treating you know that you are taking methotrexate. Special care is needed with non-steroidal anti-inflammatory painkillers (for example brufen or voltarol) and you should only take these if they are prescribed by your doctor. Do not take 'over-the-counter' preparations without discussing this first with your doctor, nurse or pharmacist. You should avoid drugs containing trimethoprim (for example **Seprin** prescribed for infections).

Can I have vaccinations while on methotrexate?

We recommended that you should not be immunised using any of the 'live' vaccines such as polio, rubella (German measles) and yellow fever.

An 'inactivated' polio vaccine can be given instead of the 'live' polio vaccine and the 'inactivated' version should also be given to people you are in close contact with, such as members of your household. If you are on methotrexate you should avoid contact with children who have been given the 'live' polio vaccine, for 4-6 weeks after vaccination.

Yearly flu vaccines and pneumovax are safe and we recommend these. Tetanus vaccine is safe.

Does methotrexate affect fertility or pregnancy?

Methotrexate can reduce fertility and is likely to harm an unborn baby. You should not take it during pregnancy. Whilst taking methotrexate, and for 6 months after methotrexate is stopped, both women and men using this drug should take contraceptive precautions. If you are planning a family, or if you become pregnant while taking methotrexate, you should discuss this with your doctor as soon as possible. You also should not breastfeed if you are taking methotrexate.

May I drink alcohol while taking methotrexate?

Yes, but only with care. If you drink alcohol you should only drink it in small amounts because methotrexate and alcohol can interact and damage your liver. Please discuss this with your doctor.

Where can I obtain further information?

If you would like any further information about methotrexate, or if you have any concerns about your treatment, you should discuss this with your doctor, nurse or pharmacist.

Remember to keep all medications out of the reach of children.

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Information for patients about Methotrexate

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Why am I prescribed methotrexate?

We use Methotrexate to treat several different types of neurological disease, including inflammatory diseases of muscles (myopathy) and nerves (for example chronic inflammatory demyelinating neuropathy or CIDP). We can also use it for myasthenia gravis and for diseases which inflame the walls of blood vessels (vasculitis). One of its actions is to reduce the activity of the immune system (the body's own defence system), so it is always used with care.

When do I take methotrexate?

You usually take Methotrexate in tablet form once a week on the same day each week. You need to take it with food and swallow it whole. Please do not crush or chew the tablet.

You can also have Methotrexate by injection once a week - either subcutaneous (an injection under the skin like insulin injections for diabetes), or intramuscular (into the buttock or thigh).

What dose do I take?

Methotrexate tablets are available in 2.5 mg and 10 mg doses. These tablets are very similar in

appearance so you should always check the dose is correct.

Your consultant will advise you about what dose you should take. Usually you will start on a low dose (for example 5 mg or 7.5 mg a week). Your consultant may then increase this. Some patients are given methotrexate by injection.

How long will methotrexate take to work?

Methotrexate does not work immediately. It may be 3 months before you notice any benefit.

What are the possible side-effects?

The following side effects can occur with methotrexate treatment:

- A feeling of sickness or diarrhoea.
- Mouth ulcers.
- Hair loss.
- Skin rashes.
- Methotrexate can affect the blood count (one of the effects is that fewer blood cells are made). If you develop unexplained bruising or bleeding, you should see your doctor.

- Methotrexate can make you more likely to develop infections. If you develop a sore throat or other infection, if you have a fever, or if you develop any new symptoms after starting methotrexate, you should see your doctor.
- Methotrexate can cause liver problems including cirrhosis. Your doctor will take blood tests to monitor your liver function and will let you know if there are any problems.
- Rarely methotrexate causes inflammation of the lung with breathlessness. If you become breathless, you should see your doctor immediately.

If you have not had chickenpox but come into contact with someone who has chickenpox or shingles, or if you develop chickenpox or shingles while you are taking methotrexate, you should see your doctor immediately as you may need special treatment.

Most doctors also prescribe folic acid tablets to patients who are taking methotrexate as this can reduce the likelihood of side-effects.

Do I need any special checks while on methotrexate?

Yes, because methotrexate can affect your blood count and sometimes cause liver problems, your doctor will arrange for you to have regular blood checks while on this drug. We may ask to keep a record booklet with your blood test results.

Please bring this with you when you visit your GP or the hospital. Your doctor may also request a chest x-ray before you start treatment.

You must not take methotrexate unless you are having regular checks.