

# Once Weekly Oral Methotrexate

**Indications:** Active rheumatoid arthritis in adults, severe forms of psoriasis vulgaris, severe psoriatic arthritis<sup>1</sup>

**Usual dose range for rheumatology indications:** 7.5–25mg orally **ONCE WEEKLY** (see SmPC for individual dosing per indication)

**Monitoring:** Ensure appropriate monitoring of bloods whether in primary or secondary care (rheumatology clinics). Usually every 1-2 weeks to stabilise and then often every 2-3 months depending on patient risk.<sup>2</sup>

**Safety in use:** Incorrect prescribing, dispensing and use of methotrexate can result in toxicity and significant patient morbidity and mortality – ensure treatment is **ALWAYS ONCE WEEKLY**.



**Toxicity:** Methotrexate toxicity can occur **at any stage**. Signs of toxicity should be considered at all stages of treatment and monitoring continued throughout treatment

## Prescribing Tips <sup>3,4</sup>

- ✓ Write the dose and number of 2.5mg tablets i.e. 12.5mg (5 x 2.5mg)
- ✓ Write **WEEKLY** clearly AND **day** of the week  
e.g. **“WEEKLY on SUNDAYS”**
- ✓ Advise patient on **SIGNS** and **SYMPTOMS** of methotrexate toxicity (provide alert card where possible)<sup>6</sup>
- ✓ Ensure blood tests are carried out prior to re-issue of prescription
- ✓ Document dose changes on new prescriptions to advise pharmacist of intention to adjust dose

## Dispensing Tips <sup>3</sup>

- ✓ Only stock and dispense 2.5mg tablets
- ✓ Store methotrexate appropriately and handle with care (wear gloves if handling tablets directly)
- ✓ Check when patient had most recent blood test.  
***This is usually every 2-3 months once stabilised.<sup>2</sup>***
- ✓ Label with:
  - **Total dose**
  - **Number of 2.5mg tablets to take**
  - **“WEEKLY” and what DAY to take**
- ✓ Counsel on **WEEKLY** nature of dosing, reinforce advice at every dispensing
- ✓ Record OTC medication taken
- ✓ Explain possible side effects and signs and symptoms of toxicity for patient to be aware of

## Patient Review tips <sup>3</sup>

- ✓ Review previous dispensed medication history at **EVERY** dispensing.
- ✓ Take care if new prescriptions or OTC use of medications which may interact (e.g. some antibiotics, NSAIDs)
- ✓ Take particular care if changes in methotrexate dose
- ✓ Review time since last dispensing for appropriateness
- ✓ Assess the patient for occurrence of any side effects (listed below) since last supply
- ✓ Ascertain patient awareness for need for **BLOOD MONITORING**
- ✓ Check that folic acid is prescribed and taken by the patient as directed by their doctor<sup>5</sup>

## Signs of Methotrexate Toxicity <sup>2</sup>

Signs of neutropenia  
(requires **immediate review** - see alert)

- **Sore throat/other infections\***
- **Fever/Chills\***

Other features of blood disorders

- **Mouth ulceration**
- **Easy bruising or bleeding**

Liver toxicity

- **Diarrhoea**
- **Vomiting**
- **Unexplained rash**

Respiratory effects

- **Breathlessness**
- **Dry persistent cough**



## ALERT <sup>6</sup> - Neutropenia and neutropenic sepsis

If patient has received methotrexate within the past 28 days and has **ANY ONE OR MORE** of the following:

- Fever or hypothermia
- Chills, rigors or shaking
- Unexplained tachycardia, hypotension or tachypnoea
- Any indwelling vascular access device
- Feels unwell

*Note: Signs/symptoms may be minimal especially if taking corticosteroids*  
**Consider neutropenic sepsis: Treat as an EMERGENCY**

### References

1. Methotrexate 2.5mg and 10mg SmPC Accessed on 05/01/2014 available on [www.HPRA.ie](http://www.HPRA.ie) (date of text revision: April 2013)
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3. PSI Guidance for pharmacists on safe supply of oral methotrexate 2012 available on: [http://www.thepsi.ie/Libraries/Practice\\_Guidance/Methotrexate\\_Guidance\\_-\\_published\\_version.sfb.ashx](http://www.thepsi.ie/Libraries/Practice_Guidance/Methotrexate_Guidance_-_published_version.sfb.ashx)
4. Irish Medicines Board, Drug Safety Newsletter, 47th edition, April 2012
5. What is the dose of folic acid to use with methotrexate therapy for rheumatoid arthritis? UKMI 2012 NHS Medicines Q&As
6. Immunosuppressant ALERT card ICGP – Dr Diarmuid Quinlan and Dr Paul Ryan ICGP Quality in Practice (QIP) Awards winners 2013