

METHOTREXATE

(Methotrexate, Methoblastin, Methaccord)

What is Methotrexate?

Methotrexate is used to treat moderate to severe ulcerative colitis and Crohn's disease. It is often used in patients when their inflammatory bowel disease (IBD) has been difficult to control, for example when they have not responded to azathioprine or multiple courses of steroids.

Methotrexate works to reduce inflammation in the body by targeting the immune system. It may take up to 3 months for the methotrexate to start working effectively. Your doctor may want you to continue taking other medicines during this time to help manage your disease.

How do I take it?

Methotrexate should only be taken ONCE A WEEK, on the same day each week. Methotrexate can be taken as a tablet. It should be swallowed whole with food. It can also be taken as an injection into fat or muscle. Your doctor will discuss the most appropriate way to take methotrexate, based on your condition.

What dose should I take?

Your gastroenterologist will prescribe an appropriate dose for your weight and condition.

What if I forget a dose?

If you forget to take a dose you can take your methotrexate up to 2 days later. If you remember after 3 days, do not take your methotrexate until on your usual medication day the following week. Do not double up on the dose.

Why am I taking folic acid as well?

Folic acid can help to reduce some of the possible side effects of methotrexate. Your doctor will discuss how often you should take folic acid. Generally, folic acid should not be taken on the same day as your methotrexate dose.

Can I take other medications?

There are some medications that should not be taken whilst on methotrexate. Non-steroidal anti-inflammatory drugs (NSAIDs) and some antibiotics should be avoided with methotrexate. It is very important you tell your doctor about any medicines you are taking. This includes over-the-counter medicines, patches, eye drops, and herbal or alternative therapies.

If you are planning to have any vaccinations you should discuss this with your gastroenterologist, GP or IBD nurse. "Live" vaccines should be avoided while on methotrexate.

Routine monitoring and follow up

When starting on methotrexate, you will need to have regular bloods test to check for immune suppression, kidney dysfunction and liver inflammation. Your GP can monitor your blood results but you will also require regular check-ups with your gastroenterologist. If you become unwell or your blood tests are abnormal, you may require monitoring more frequently or have your dose of methotrexate adjusted.

It is very important that you have regular blood tests and check-ups with your doctor. It is unsafe to take methotrexate without having these done.

What are the side effects of methotrexate?

Up to 80% of people tolerate methotrexate without problems. The most common side effects include nausea, vomiting, diarrhoea and mild abdominal pain or bloating. Taking folic acid can reduce the chance of experiencing these side effects. Other side effects include lowered immune system, flu-like illness, mouth ulcers, mild hair loss, skin rash and increased bruising or bleeding. Less common but important side effects include liver inflammation, kidney dysfunction and chest infections. Very rare side effects include severe infections, skin reactions and severe allergic reaction.

Pregnancy and Methotrexate

Methotrexate is generally not recommended for women of childbearing age. It can cause miscarriages and birth defects. If you are a woman of childbearing age and your gastroenterologist has prescribed methotrexate, you will need to use a proven method of contraception to avoid pregnancy. Methotrexate should not be used in breastfeeding mothers. Men taking methotrexate should stop treatment 3 months before trying to conceive.

What do I do if I feel unwell?

Methotrexate can lower your immune system making you more prone to infection. If you develop a chest infection, you should visit your GP who may prescribe a course of antibiotics to help you recover more quickly. It is important to report the following symptoms to your gastroenterologist, GP or IBD nurse. You may require a blood test to determine if you need to adjust your methotrexate dose:

- High temperature and chills
- Persistent sore throat
- Generally feeling unwell or vomiting
- Unexpected bruising or bleeding
- Skin rash
- Severe abdominal pain

Who do I contact for help?

You can contact the IBD Helpline on (03) 9288 3592 during business hours. Private patients can contact their gastroenterologist's private rooms directly.

For urgent matters outside of business hours, contact the St Vincent's Hospital Switchboard on (03) 9288 2211. Ask to speak with the gastroenterologist on call. In an emergency you should go to your local Emergency Department or call an ambulance (dial 000).