Methotrexate Factsheet

TREATMENT WITH METHOTREXATE

Methotrexate is an immunosuppressant drug. This means that it reduces the activity of your immune or defence system. If you have vasculitis and your immune system is attacking parts of your own body, Methotrexate may be prescribed to you to help control your immune system and your symptoms.

Types of vasculitis which respond to methotrexate include Granulomatosis, with Polyangiitis (GPA), Microscopic Polyangiitis (MPA), Eosinophilic Granulomatosis with Polyangiitis (EGPA) and Behcet’s disease.

Methotrexate is usually given in tablet form although may be given by injection when tablets are not tolerated. The dose is taken weekly, not daily. The dose will depend on your condition, your weight and your height. You will probably be given a low dose to start with which will be increased to a maintenance dose as you get used to the medication. The length of time you will have to take methotrexate will depend on the type of vasculitis you have and your response to treatment. Typically, patients have to take it for at least a year.

Because methotrexate can affect the number of blood cells your bone marrow produces you will need to have blood tests to monitor your blood count. This needs to be done before treatment, every one to two weeks while your dose is being stabilised, and then every 2-3 months. You will also need blood tests to check your liver from time to time. You may be asked to take folic acid (vitamin B6) tablets with methotrexate as these help to reduce the risk of side effects such as mouth ulcers. Many people do not have any problems with methotrexate. However, side effects you need to be aware of include:

- Nausea and vomiting – these can usually be controlled with anti-sickness medicine.
- Feeling generally unwell.
- Mouth ulcers.
- Loss of appetite.
- Dizziness.
- Diarrhoea.
- Flu-like symptoms (fever, aches and pains).
- A skin rash.
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- Jaundice.
- Hair loss (usually hair thinning rather than total baldness)
- Lung inflammation (pneumonitis)

Because your immune system is suppressed you will be more likely to get infections, so you should contact a doctor if you get a sore throat, fever or other symptoms that suggest an infection. You should seek medical advice quickly if you get jaundice (yellowing of the skin, itchy skin or yellowing of the eyes), unexplained bruising or bleeding, or severe side effects of any kind. You should also contact a doctor immediately if you have not had chickenpox or shingles and come into contact with either of these conditions whilst taking methotrexate.

You should not normally take methotrexate if you are pregnant or breastfeeding.
You should avoid ‘live vaccines’ such as oral polio, BCG and rubella, but you should make sure you keep your flu and pneumonia vaccines up to date.

Patient Support

The Lauren Currie Twilight Foundation
http://www.thelaurencurrietwilightfoundation.org

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