This information leaflet is designed to answer common questions patients ask about Methotrexate. Further information can be found in the information leaflet supplied by the manufacturer or from your specialist nurse, doctor or pharmacist.
What is Methotrexate?
Methotrexate is an immunosuppressant drug, it reduces the activity of the body's immune system (the defence system) dampening down the underlying disease process with the aim to prevent further relapses, rather than treating symptoms.
Methotrexate is used in many other conditions apart from NMO such as rheumatoid arthritis, psoriasis, crohns disease.

How long does it take to work?
Methotrexate does not work immediately it can take up to 8 - 12 weeks to take effect. Methotrexate cannot cure the condition and you may need to take it for several years to keep your relapses under control.

What dose do I take?
Methotrexate is only taken once a week on the same day each week. The tablets/capsules should be swallowed whole and taken with a glass of water after food, do not crush or chew the capsules.
Methotrexate is usually prescribed in **2.5mg tablets**. However, it is also available as 10mg tablets, the two strengths are different shapes but similar colour. To avoid confusion it is recommended that only 2.5mg tablets are used.

The dose starts at 7.5mg weekly increasing to maximum 25mg weekly.

Your doctor will advise you about the correct dose and may be changed depending on your response to the medication. A vitamin called folic acid has been shown to help your body cope with the Methotrexate and reduce some of the side affects you may experience. Folic acid tablets are taken once per week on a different day to Methotrexate.

**What do I do if I miss a dose?**

If a dose is missed on the normal day, you can take it one or two days later. **Do not take** the dose if it is **three** or more days late. For the following week take the dose on the usual day. **Do not** double the dose. If you take too much Methotrexate tell your doctor immediately.
Can I take other medicines along with Methotrexate?
Methotrexate may be prescribed along with other drugs in treating your condition. Some drugs interact with Methotrexate, such as non-steroidal anti-inflammatory medications e.g. Ibrufen, Aspirin, Diclofenic, Naproxen; and anti-bacterial e.g. Ciprofloxacin, Neomycin, Cotrimoxazole, and Doxycycline. You should always tell any doctor treating you that you are taking Methotrexate. Do not take over-the-counter preparations or herbal remedies without discussing this first with your doctor, nurse or pharmacist.

What are the possible side effects?
The most common side-effects of Methotrexate are sickness, vomiting or abdominal (stomach) pain, diarrhoea. These side effects often occur at the beginning of treatment but usually settle as you become used to the medication. Methotrexate can affect the production of some of the cells in bone marrow. This can make you more prone to infections, or cause problems with clotting of your blood or wound healing.

Rarely, Methotrexate causes inflammation of the lung. If you become breathless or develop a dry cough, see a doctor as soon as possible. Most people cope well on Methotrexate.
What do I do if I experience side effects?
If you experience any signs of illness or side effects such as infection, unexplained bruising, bleeding, sore throat or mouth ulcers, fever or malaise, contact your nurse specialist, doctor, or pharmacist. It may be necessary for you to have a blood test to check how your body is coping.

If you have not had chickenpox but come into contact with someone who has chickenpox or shingles, or if you develop chickenpox or shingles, you should contact your doctor as soon as possible. This is because chickenpox and shingles can be severe in people on treatment such as Methotrexate which has effects on the immune system. Therefore you may require antiviral treatment.

Vaccinations
Pneumovax and yearly flu vaccines are safe and recommended.

It is not recommended that you be immunised with 'live' vaccines such as yellow fever. However, in certain situations a live vaccine may be necessary (for example rubella immunisation in women of childbearing age), in which case your doctor will discuss the possible risks and benefits of the immunisation with you.
Do I need any special checks while on Methotrexate?
Methotrexate can affect the white cell count, and may cause liver or kidney problems. It is important to have your blood regularly checked for early signs of changes. These blood tests show if the medication is working to control the inflammation or if you are developing any side effects.

We recommend the following blood tests;

- full blood count including platelets,
- urea and electrolytes
- liver function tests

Initially bloods are taken weekly for 6 weeks, fortnightly for 6 weeks, monthly for 6 months and then 2 monthly, unless problems occur and then bloods will be monitored more frequently.

The blood tests can be done at the clinic or, with agreement of your GP at your local surgery. You may be asked to keep a record booklet with your blood test results. Bring this with you when you visit your GP, hospital or dentist.
What happens if I need an operation?
Let the doctor or nurse know so they can advise you what to do about your Methotrexate therapy. If you do need an operation, in most cases you will be advised to continue taking the Methotrexate.

Alcohol
It is safe to drink alcohol in moderation whilst on Methotrexate, however, it may aggravate liver problems.

Is Methotrexate OK in pregnancy and breastfeeding?
Fertility may be reduced for both males and females during therapy but this tends to be reversible. Methotrexate can harm the baby and it is very important not to become pregnant or to father a child whilst taking Methotrexate and for at least 3 months after Methotrexate is stopped, therefore reliable contraception is essential.

You should not breastfeed while taking Methotrexate. The drug could pass into the breast milk and risks to the baby are unknown.
If you have any concerns regarding your treatment, please contact:

NMO Nurse Specialist
Tel 0151 529 8357
nmo.advice@thewaltoncentre.nhs.uk

Or

NMO Nurse Specialist
Tel 01865 231 905
nmo.advice@ouh.nhs.uk

www.nmouk.nhs.uk