Dear Patient on Methotrexate

We are pleased to include with this Methotrexate Update Information sheet, the new Arthritis Research UK leaflet. We have also included the Methotrexate Patient Alert Card. Please try to keep this in your purse/wallet at all times. If you would like further copies or need to replace your existing alert card please contact the Rheumatology Department on 02392 286935/Rheumatology.pail@porthosp.nhs.uk

Remember
Methotrexate is only taken once per week, NEVER daily. It can be administered as either tablets by mouth or as an injection.

If you are on tablets please ensure that you are only prescribed and issued the 2.5mg tablets. Sometimes a 10mg tablet is dispensed and one needs to be particularly careful to ensure you take the correct dose. If you are dispensed 10mg Methotrexate tablets please discuss with your GP or pharmacist and request that this is changed.

Consent - What does this mean?
Before any doctor, nurse or therapist examines or treats you they must have your consent or permission. Consent ranges from allowing a doctor to take your blood pressure (rolling up your sleeve and presenting your arm is implied consent) to signing a form saying you agree to the treatment or operation.

It is important before giving permission that you understand what you are agreeing to. If you do not understand – ask. More detailed information is available on request.

Information we hold about you and your rights under the Data Protection Act
Please refer to the booklet ‘Your Health-care Information – Your Rights! Our Responsibilities!’ for further guidance.

How to comment on your treatment
We aim to provide the best possible service and staff will be happy to answer your questions. However, if you have any concerns you can also contact the Patient Experience Service on 0800 917 6039 or E-mail: pht.pals@porthosp.nhs.uk

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Specialist Support
This leaflet can be made available in another language, large print or another format. Please speak to the Ward Manager who can advise you.
Always show your alert card to any Health Care Professional that you come into contact with e.g.
- Any member of the Health Care team during outpatient hospital/GP/Dentist appointments.
- Pharmacist (when starting any new medications or buying medicines over the counter).
- Any member of the Health Care team during any hospital inpatient overnight stay.

**Getting the most from your Methotrexate treatment**

**Monitoring whilst on Methotrexate**
It is important that you attend your appointments with your Rheumatology Consultants and Nurses, so that your progress can be monitored.

If you need to change your appointment, please telephone the Rheumatology Department Outpatient Reception on 023 9228 6831.

**Methotrexate and other medicines**
Please stop methotrexate when taking antibiotics, you can restart the methotrexate after the course of antibiotics has been completed and you are clear of infection.
For any over the counter tablets (including herbal preparations) and new prescription medications, always check with your pharmacist if there are any known drug interactions.

**How to store methotrexate**
Keep all medicines out of the reach and sight of children. Store in a cool, dry place, away from direct heat and light.
Any unwanted or unused methotrexate tablets or injections must be disposed of in a special way therefore, if you need to dispose of any methotrexate ask your local pharmacy for advice. Please also be sure not to dismantle any devices or syringes that contain medication.

**Before having a child**
It is important that you do not become pregnant while you are taking Methotrexate.

Before trying to conceive:
- Women must stop Methotrexate for at least 3 months.
Men may need to consider stopping medication. Current BSR guidelines are generally reassuring, though this is based on very limited evidence.

Please discuss further with the rheumatology team if you are considering pregnancy.

**Vaccination and Immunisations**
Live vaccines should be avoided or discussed further with your rheumatologist. The only exception is the shingles vaccine ‘Zostavax’ which can be given if you are on Methotrexate 25mg weekly or less. However, if you take other medications such as steroids or Biologic therapies please discuss this with Rheumatology first. Other inactivated vaccines are considered safe.

**Flu vaccination**
Recommended annually.

**Pneumococcal vaccination**
Recommended every 5-10 years.

**Travel vaccination** – Whilst you are taking Methotrexate and for some time after treatment has finished you should avoid live vaccines. If in doubt discuss any vaccinations with your own family doctor.
Infections
Methotrexate lowers the body’s resistance and there is a chance that you may get an infection more easily. We would suggest that you do not take your Methotrexate whilst you have an active infection that is sufficiently severe for you to need antibiotics – If you are worried, please speak to your own doctor.

Childhood infections
If you have come into contact with a child with any potentially serious childhood infections, please consider contacting Rheumatology.

If you come into contact with shingles or chicken pox and you have never previously had chicken pox or shingles you may need additional advice.

Coming into hospital
If you are admitted to hospital, please ensure that you have discussed with your medical team that you are taking Methotrexate weekly.

Also, speak to the pharmacist for the ward/department. They will need to know the details on how you take your methotrexate.

Having an operation
Methotrexate can be continued for many forms of elective surgery, however your surgeon may still require you to suspend your methotrexate. We suggest you discuss this further with your surgical team and your Rheumatologist.

Folic Acid – why Is it necessary to take folic acid with methotrexate?
Methotrexate is a drug that prevents immune cells from using folic acid to manufacture DNA. Methotrexate can cause some side effects including nausea, mouth ulcers, changes in your blood and some hair thinning. To reduce the risk of side effects, you will be prescribed a single 5mg tablet to be taken 24-48 hours after your dose of Methotrexate, folic acid is best avoided on the same day as Methotrexate.

If you continue to have side effects please contact the department on 023 9228 6935 / Rheumatology.pail@porthosp.nhs.uk.

Blood test monitoring for patients on methotrexate
It is very important that whilst taking methotrexate that you adhere to regular blood test monitoring.

Blood tests are usually required:
1. Every 2 weeks until on a stable dose for 6 weeks.
2. Monthly for 3 months.
3. 12 weekly.

This can vary depending on your other medications so it is important that you discuss this with your Rheumatologist to establish the frequency you require.

Needing more blood test forms
If you need more blood test forms please telephone the Rheumatology Department 023 9228 6935 or email: Rheumatology.pail@porthosp.nhs.uk.
**DAWN**

**DAWN** is an electronic blood monitoring system that is used within the department to monitor the blood results of all patients on rheumatological medications. Previously blood results had to be checked manually and we were unable to easily identify those patients that had not had their blood test. As part of the DAWN system blood results from the pathology department are transferred to the DAWN system when you have your blood test taken.

If your results do not fall within an acceptable range, you may be contacted and you will be advised if any change to treatment is required.

If you miss an appointment for a blood test, the system will recognise this and contact you to remind you.

Failure to comply with blood monitoring can result in treatment being suspended.

If you would like to speak to a member of staff about DAWN – please contact the department 023 9228 6935 / Rheumatology.pail@porthosp.nhs.uk.

**Common side effects:**

These affect less than 1 in 10 people who take methotrexate.

- **Increased chance of infection** – limit/avoid contact with people who you know have active infections. Contact your GP if you develop a sore throat or high temperature.
- **Nausea, vomiting or diarrhoea** – eat little and often, stick to simple foods and drink plenty of water to replace loss of fluids.
- **Sore mouth** – brush your teeth with a soft toothbrush 2-3 times daily and use a mouth rinse frequently.