

For the Patient: Methotrexate tablets

Other names:

 Methotrexate (meth oh trex' ate) is a drug that is used to treat many types of cancers. It is a tablet that you take by mouth.

- Tell your doctor if you have ever had an unusual or **allergic reaction** to methotrexate before taking methotrexate.
- A **blood test** may be taken before each treatment. The dose and timing of your chemotherapy may be changed based on the test results and/or other side effects.
- It is important to **take** methotrexate exactly as directed by your doctor. Make sure you understand the directions. Methotrexate should be taken on an **empty** stomach with a glass of water.
- For once daily dosing: If you miss a dose of methotrexate, take it as soon as you
 can if it is within 12 hours of the missed dose. If it is over 12 hours since your missed
 dose, skip the missed dose and go back to your usual dosing times.
- For once or twice weekly dose: If you miss a dose of methotrexate, take it as soon
 as you can if it is within 24 hours of the missed dose. If it is over 24 hours since your
 missed dose, call your doctor for advice.
- If you vomit right after taking the medication, call your healthcare team for advice.
- Your healthcare team may tell you to **drink** plenty of liquids e.g., 8-12 cups (2000-3000 mL or 70-100 oz) a day. This helps prevent kidney problems.
- Other drugs such as acitretin (SORIATANE®), cyclosporine (NEORAL®), digoxin (LANOXIN®), nonsteroidal anti-inflammatory drugs e.g., ibuprofen (ADVIL®), some antibiotics e.g., penicillins (APO-PEN VK®), sulfonamides (APO-SULFATRIM®), and trimethoprim (APO-TRIMETHOPRIM®), phenytoin (DILANTIN®), probenecid (BENURYL®), and salicylates (ASPIRIN®), may interact with methotrexate. Tell your doctor if you are taking these or any other drugs as you may need extra blood tests or your dose may need to be changed. Check with your doctor or pharmacist before you start taking any new drugs.
- Alcohol may increase the risk of liver problems with methotrexate and should be avoided.

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- Methotrexate may cause **sterility** in men and **menopause** in women. If you plan to have children, discuss this with your doctor before being treated with methotrexate.
- Methotrexate may damage sperm and may harm the baby if used during pregnancy. It is best to use birth control while being treated with methotrexate. Tell your doctor right away if you or your partner becomes pregnant. Do not breast feed during treatment.
- **Tell** your doctor, dentist, and other health professionals that you are being treated with methotrexate before you receive any treatment from them.
- **Store** methotrexate tablets out of the reach of children, at room temperature, away from heat, light, and moisture.

Changes in blood counts

This drug may cause temporary changes in your blood counts. Your doctor will be following these changes carefully by ordering regular blood tests. Adjustment of your treatment may be needed in certain circumstances.

BLOOD COUNTS	MANAGEMENT
Normal platelets help your blood to clot normally after an injury (e.g., cut). When the platelet count is low you may be more likely to bruise or bleed.	 To help prevent bleeding problems: Try not to bruise, cut, or burn yourself. Clean your nose by blowing gently. Do not pick your nose. Avoid constipation. Brush your teeth gently with a soft toothbrush as your gums may bleed more easily. Maintain good oral hygiene. Some medications such as ASA (e.g., ASPIRIN®) or ibuprofen (e.g., ADVIL®) may increase your risk of bleeding. Do not stop taking any medication that has been prescribed by your doctor (e.g., ASA for your heart). For minor pain, try acetaminophen (e.g., TYLENOL®) first, but occasional use of ibuprofen may be acceptable.

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BLOOD COUNTS	MANAGEMENT
Normal white blood cells protect your body by fighting bacteria (germs) that cause infection. When they are low, you are at greater risk of having an infection.	 To help prevent infection: Wash your hands often and always after using the bathroom. Take care of your skin and mouth. Avoid crowds and people who are sick. Call your healthcare team <i>immediately</i> at the first sign of an infection such as fever (over 38°C or 100°F by an oral thermometer), chills, cough, or burning when you pass urine.

Side effects are listed in the following table in the order in which they may occur. Tips to help manage the side effects are included.

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SIDE EFFECTS	MANAGEMENT
Nausea does not usually occur with methotrexate tablets.	
Skin rashes may occur.	To help itching:
	You can use calamine lotion.
	 If very irritating, call your doctor during office hours.
	 Otherwise make sure to mention it at your next visit.
Your skin may sunburn easily.	To help prevent sunburn:
	Avoid direct sunlight.
	 Wear a hat, long sleeves and long pants or skirt outside on sunny days.
	Apply a sunscreen with an SPF (sun protection factor) of at least 30.
	 Tell your healthcare team if you have a severe sunburn or skin reaction such as itching, rash, or swelling after sun exposure.
	 Refer to Your Medication Sun Sensitivity and Sunscreens* or the BC Health Guide for more information.

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SIDE EFFECTS	MANAGEMENT
Diarrhea may occur. If you have diarrhea and it is not controlled, you can quickly become dehydrated.	 To help diarrhea: Drink plenty of liquids. Eat and drink often in small amounts. Avoid high fibre foods as outlined in Food Ideas to Help with Diarrhea During Chemotherapy.* Note: If lactose in milk usually gives you diarrhea, the lactose in the tablet may be causing your diarrhea. Take LACTAID® tablets just before your methotrexate dose. Tell your healthcare team if you have diarrhea for more than 24 hours.
Sore mouth may occur a few days after treatment. Mouth sores can occur on the tongue, the sides of the mouth, or in the throat. Mouth sores or bleeding gums can lead to an infection.	 Brush your teeth gently after eating and at bedtime with a very soft toothbrush. If your gums bleed, use gauze instead of a brush. Use baking soda instead of toothpaste. Make a mouthwash with ¼ teaspoon baking soda AND ¼ teaspoon salt in 1 cup warm water and rinse several times a day. Try the ideas in Food Ideas to Try with a Sore Mouth.*
Loss of appetite and weight loss are common and may persist long after discontinuation of methotrexate.	Try the ideas in Food Ideas to Help with Decreased Appetite.*
Tiredness, lack of energy and sometimes dizziness may occur.	 Do not drive a car or operate machinery if you are feeling tired. Try the ideas in Fatigue/Tiredness – Patient Handout.*
Hair loss is rare with methotrexate tablets. Your hair will grow back once you stop treatment with methotrexate. Colour and texture may change.	 Use a gentle shampoo and soft brush. Care should be taken with use of hair spray, bleaches, dyes, and perms. If hair loss is a problem, refer to Resources for Hair Loss and Appearance Changes – Patient Handout.*
Your skin may darken in some areas.	This will slowly return to normal once you stop treatment with methotrexate.

^{*}Please ask your nurse or pharmacist for a copy.

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Methotrexate tablets

STOP TAKING METHOTREXATE AND CHECK WITH YOUR HEALTHCARE TEAM OR GET EMERGENCY HELP IMMEDIATELY IF YOU HAVE:

- Signs of an infection such as fever (over 100°F or 38°C by an oral thermometer), chills, cough, pain or burning when you pass urine.
- Signs of **bleeding problems** such as black tarry stools, blood in urine, pinpoint red spots on skin, extensive bruising.
- Signs of a **blood clot** such as tenderness or hardness over a vein, calf swelling and tenderness, sudden onset of cough, chest pain, or shortness of breath.
- Signs of an **allergic reaction** (rare) soon after a treatment including dizziness, fast heart beat, face swelling, or breathing problems.
- Signs of **lung problems** such as shortness of breath or difficulty in breathing.
- Seizures or loss of consciousness.
- Sudden abdominal pain or tenderness.

CHECK WITH YOUR HEALTHCARE TEAM AS SOON AS POSSIBLE (DURING OFFICE HOURS) IF YOU HAVE:

- Signs of anemia such as unusual tiredness or weakness.
- Signs of liver problems such as yellow eyes or skin, white or clay-coloured stools.
- Signs of kidney problems such as lower back or side pain, swelling of feet or lower legs.
- Changes in eyesight.
- Signs of gout such as joint pain.

CHECK WITH YOUR HEALTHCARE TEAM IF ANY OF THE FOLLOWING CONTINUE OR BOTHER YOU:

- Uncontrolled nausea, vomiting, or diarrhea.
- For diabetics: uncontrolled blood sugars.
- Headache not controlled with acetaminophen.
- Easy bruising or minor bleeding.
- Redness, swelling, pain, or sores on your lips, tongue, mouth, or throat.
- Skin rash or itching.

REPORT ADDITIONAL PROBLEMS TO YOUR HEALTHCARE TEAM		

DEPORT ARRITONIAL PROPIEMS TO VOLID LIEAL THEADE TEAM

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