Drug Information Table

Disease-Modifying Antirheumatic Drugs (DMARDs I) – methotrexate

Therapeutic Use	Administration	
• Decrease joint inflammation and subsequently joint damage.	• Give methotrexate once a week via route prescribed (oral, subcutaneous or intramuscular). • Folic acid supplement may be prescribed to decrease risk of toxicity.	
Side/Adverse Effects	**Interventions**	**Patient Instructions**
• Bone marrow suppression (decreased platelets, red and white blood cells)	• Monitor for decreased platelets, red and white blood cell counts.	• Report abnormal bleeding, bruising, or petechiae (pinpoint areas of blood under the skin). Report ulcerations of the mouth or tongue.
• Increased risk of infection	• Monitor for signs and symptoms of infection.	• Report signs and symptoms of infection immediately.
• Liver damage	• Monitor liver function tests and observe for jaundice.	• Avoid ingesting alcohol. • Report yellowing of the skin and eyes immediately.
• Gastrointestinal ulceration	• Monitor for gastrointestinal bleeding (with methotrexate).	• Report blood in vomitus or stools.
• Pulmonary fibrosis	• Monitor for respiratory distress and decreased oxygenation	• Report difficulty breathing or shortness of breath • Drink 8 to 12 8-ounce glasses of water daily to ensure excretion of drug • Use contraception and do not take within 6 months of pregnancy or during breastfeeding
Contraindications	**Precautions**	**Interactions**
• Pregnancy Category X (methotrexate) • Liver insufficiency or hepatitis • Renal insufficiency	• Peptic ulcer or ulcerative colitis • Active bacterial or viral infections	• Concurrent use of methotrexate and digoxin may reduce digoxin level • Concurrent use of methotrexate and NSAIDs, salicylates, and sulfonamides may cause toxicity • Alcohol use may increase risk of hepatotoxicity