



Methotrexate

To treat skin conditions

Your dermatologist has prescribed methotrexate to treat your skin condition. This handout explains doses, monitoring, side effects, and drug interactions.

What is methotrexate?

Methotrexate is a widely used oral medicine for treating many chronic skin disorders such as *psoriasis*. It slows down the immune system, which decreases the inflammation that is causing the skin disorder.

How do I take it?

Methotrexate is taken 1 day a week, on the same day every week (for example, every Saturday morning). Some people take half their dose in the morning and half in the evening (for example, half Saturday morning and half Saturday evening). This can help lessen nausea.

Dose

Methotrexate comes in 2.5 mg tablets, but you will take more than 1 pill at a time. Most people take 6 to 10 tablets for their once-a-week dose. You may get a low “test dose” first to make sure your body can handle the medicine before you start your regular dose.

Why do I also need to take a daily 1 mg dose of folate?

Folate, or *folic acid*, is a type of B vitamin (vitamin B9). Your body needs folate to make blood cells.

One of the possible serious side effects of methotrexate is that it reduces your body’s ability to make:

- White blood cells, which help your body fight infection
- Red blood cells, which carry oxygen to tissues
- *Platelets*, which are needed for your blood to clot

Taking a daily 1 mg dose of folate while taking methotrexate helps prevent these side effects.

What should I expect?

Most people start to see improvement in their skin about 1 to 2 months after starting methotrexate. When you start taking methotrexate, we may ask you to have a blood test after your first dose, then every 1 to 2 weeks until you are on a stable dose. We will continue to do blood tests every 3 months while you are taking methotrexate.

Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff are also available to help.

Dermatology Center:
206-598-5065

Rarely, methotrexate can cause serious liver damage. If this damage is not diagnosed early, it can be permanent. We may recommend a liver biopsy after you have been on methotrexate for a few years.

Is it safe?

All medicines, even naturopathic or homeopathic treatments, have possible side effects. Talk with your doctor who prescribed methotrexate about side effects. Methotrexate has been used for decades, so we have a good idea of what common and rare side effects to watch for.

Important Note for Women

If you are pregnant or plan to become pregnant, stop taking methotrexate right away and call us. Methotrexate can cause miscarriage or birth defects. Women of childbearing age should use reliable birth control while taking methotrexate.

Side Effects

The common side effects of methotrexate are:

- Stomach upset and nausea
- Low blood counts
- Decreased ability to fight infection

When to Call Your Doctor

Call your doctor if you have any of these symptoms while you are taking methotrexate:

- Fever higher than 100.4°F (38°C)
- Painful rash
- Shortness of breath or a new cough
- Severe abdominal pain
- Yellowing of skin and eyes (*jaundice*)

What else should I know about taking methotrexate?

- Be sure to tell every health care provider you see that you are taking methotrexate. Bring all your medicines or a list of your current medicines to every clinic or hospital visit.
- Follow these guidelines while you are taking methotrexate:
 - **For infection:** Do not use trimethoprim/sulfamethoxazole (Bactrim/Septra). Ask for a different kind of antibiotic.
 - **For pain:** Do not use NSAIDs (ibuprofen, naproxen, indomethacin). Ask your health care provider what to take instead.

UW Medicine
UNIVERSITY OF WASHINGTON
MEDICAL CENTER

Dermatology Center
Box 354697
4225 Roosevelt Way N.E. 4th Floor
Seattle, WA 98105
206-598-4067