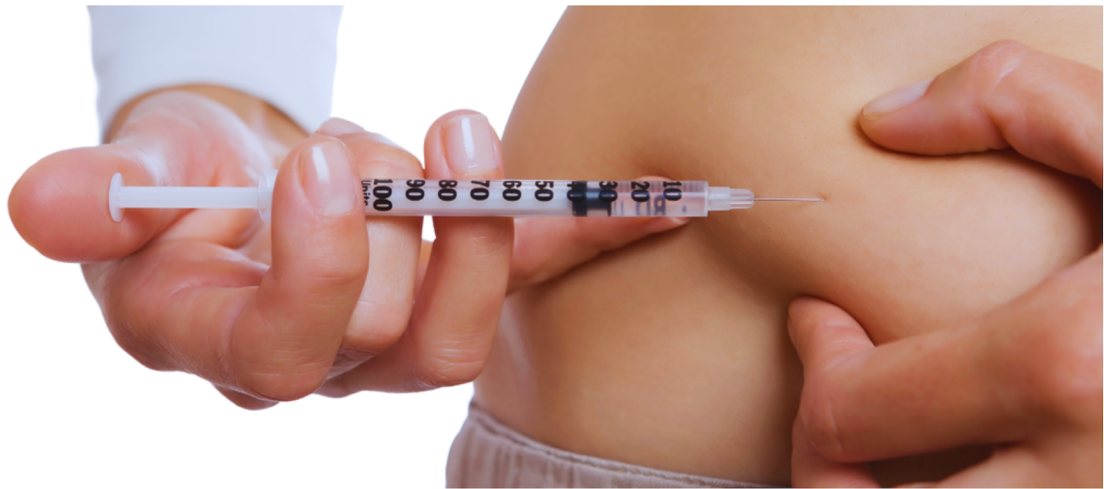


# Subcutaneous Methotrexate Injection

## What is Methotrexate?

Methotrexate treats several diseases, including rheumatoid arthritis, psoriasis, and inflammatory bowel disease. It is also used to treat diseases that cause inflammation within the immune system (the body's defence system). Methotrexate can be taken orally or injected into the subcutaneous tissue (an injection under the skin, like an insulin injection for diabetes).



## Why am I prescribed a subcutaneous injection of Methotrexate?

When taking Methotrexate, if you are having difficulty tolerating the oral form, it is essential to inform your healthcare provider.

They may recommend switching to the injection form of Methotrexate. The injection allows for better absorption, which can increase its effectiveness.

Additionally, the injection may help you tolerate higher doses of Methotrexate if necessary for your condition.

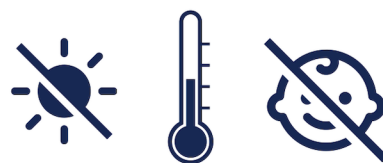
As always, following your healthcare provider's instructions closely and letting them know of any issues you may be experiencing is essential.

## How is it taken?

Subcutaneous Methotrexate is injected ONCE A WEEK on the same day, at any time.

## How should methotrexate be stored?

- Keep it in a box away from sunlight
- Keep in a cool area at room temperature
- Keep the medicine away from children



## How much methotrexate should I inject?










It would be best if you injected the dose of methotrexate as prescribed by your healthcare provider. Please refer to the chart below to check how much volume you should administer:



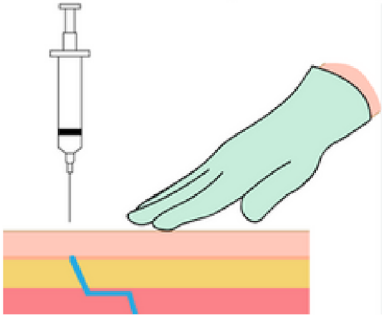



<b>Methotrexate Dose (50mg/2ml)</b>	<b>7.5mg</b>	<b>10mg</b>	<b>12.5mg</b>	<b>15mg</b>	<b>17.5mg</b>	<b>20mg</b>	<b>22.5mg</b>	<b>25mg</b>
<b>Amount to be drawn in 1ml syringe</b>	<b>30 units</b>	<b>40 units</b>	<b>50 units</b>	<b>60 units</b>	<b>70 units</b>	<b>80 units</b>	<b>90 units</b>	<b>100 units</b>

## What supplies do I need?

		
<b>Methotrexate</b>	<b>1 ml insulin syringe with needle</b>	<b>Alcohol swabs</b>
		
<b>Gloves</b>	<b>Sharps Box</b>	<b>Cotton balls</b>

# Step-by-step Guide for self-administration of Subcutaneous Methotrexate

		
<p><b>1. Wash hands with soap and water. Dry your hands.</b></p>	<p><b>2. Wear gloves</b></p>	<p><b>3. Remove the cap from Methotrexate vial</b></p>
		
<p><b>4. Wipe the rubber top clean with an alcohol swab</b></p>	<p><b>5. Hold the syringe in your hand like a pencil. With the cap still on, pull back the plunger to the line on your syringe that corresponds to your dose of methotrexate. This fills the syringe with air.</b></p>	<p><b>6. Insert the needle into the rubber top. Do not touch or bend the needle. Push the air into the vial. This keeps a vacuum from forming.</b></p>
		
<p><b>7. Turn the vial upside down and hold it in the air. Keep the needle tip in the medicine vial. Pull back the plunger to the line on your syringe that corresponds to your dose of methotrexate.</b></p>	<p><b>8. Keep the syringe tip in the medicine to remove air bubbles from the syringe. Tap the syringe with your finger to move air bubbles to the top. Then, gently push the plunger to make the air bubble back into the vial. If you have a lot of bubbles, push the plunger to make all the medicine back into the vial. Draw the medicine out again slowly and tap air bubbles out. Double-check that you still have the right amount of medicine drawn up.</b></p>	<p><b>9. Remove the syringe from the vial.</b></p>

		
<p><b>10. Select an area – abdomen, at least 5cm from belly button toward your side.</b></p>	<p><b>11. Hold the syringe in one hand with the needle pointing down. With your other hand, gently pinch the cleaned area.</b></p>	<p><b>12. Vertically insert the entire needle length (at 90°angle) into the skin.</b></p>
		
<p><b>13. Remove the needle by pulling it straight out. You can now let go of the skin fold.</b></p>	<p><b>14. Apply the cotton ball on the injection site for 10 seconds.</b></p>	<p><b>15. Discard the used syringe with the needle and leftover Methotrexate from the vial into the sharp box.</b></p>

Remember to rotate the injection sites for subsequent doses.

## What happens if I spill the medicine?

### If you've spilt on surfaces:

1. Wear gloves
2. With an absorbent towel, quickly clean the spillage from the outer edges.
3. Clean in a circular motion towards the centre and dispose of the towel in a double-sealed plastic bag.
4. Clean the affected area at least three times with bleach (1 portion of bleach in 5 portions of water)
5. Follow up with routine cleaning
6. Remove gloves and wash hands

### If you've spilt on clothing:

- Remove promptly
- Rinse clothing under running water
- Squeeze dry before washing separately with hot water

### If Methotrexate enters your eyes:

Wash the affected eye with cold running water for 5-10 minutes.

### If Methotrexate comes into contact with your skin:

Wash the affected area continuously under cold running water for at least 5 minutes.

## What monitoring is required?

You will need regular blood tests while on methotrexate. Methotrexate may occasionally lower blood counts and cause liver inflammation. However, these are usually reversible if detected early. It is not safe to continue methotrexate if you do not come for regular blood checks.

## Can it be taken with other medications?

Generally, you should show your doctor or pharmacist all other medications you are taking or plan to take, including supplements, antibiotics, and over-the-counter medications.

Alcohol should, however, be avoided while on Methotrexate, as the combination may increase the risk of liver problems.

## What are the possible risks associated with methotrexate?

Side effects	Warning signs	Things you need to do
Mouth ulcers		Take folic acid as prescribed. If ulcers persist, inform your doctor.
Nausea, vomiting, abdominal pain, diarrhoea (lesser with subcutaneous injection)		Take folic acid as prescribed. Your doctor may adjust the dose of methotrexate.
Rash		Rare. If present, inform your doctor.
Hair loss		Often transient, it generally recovers when the dose is reduced.
Low blood count	Easy bruising, severe sore throat, tiredness, paleness	Do regular blood counts
Liver inflammation	Yellow eyes, tea-coloured urine, constant abdominal pain	Inform your doctor about any history of liver disease. Do regular liver function tests
Risk of infection – fever, flu or sore throat		Avoid close contact with people with cough/cold. Discuss planned vaccinations with your doctor.
Slight risk of hardening of the lungs	Breathlessness or persistent dry cough	If you experience breathlessness, please go to the Emergency Department.

**Please seek medical attention if you experience any of the above symptoms.**

## What if I miss a dose?

If you miss a dose or forget to inject your medicine, inject it as soon as you remember. Adjust the timing of your next dose to be one week from the current dose. Do not double the next dose to make up for the missed dose.



## Does Methotrexate affect fertility or pregnancy?

Methotrexate may cause severe birth defects. Do not take Methotrexate if you are trying to conceive, during pregnancy or when breastfeeding. Women must use contraception while on Methotrexate and at least three months after stopping Methotrexate.



Do not take Methotrexate unless you are on reliable contraception. You are advised to consult your doctor if you are planning to conceive. Breastfeeding is not advisable. In men who are planning to father a child, Methotrexate may be used in discussion with your physician.



## Can I have immunisations while on Methotrexate?

Pneumococcal, influenza, hepatitis A and B, and tetanus vaccinations are allowed. Avoid immunisations with live vaccines such as polio, varicella (chicken pox), measles, mumps, and rubella (MMR).



## Are there any alternatives to Methotrexate?

Several medications are available to treat certain diseases. Your doctor will advise you on the safest and most effective option. If you have any concerns, do raise them with your doctor.

Contributed by Rheumatology Service

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