

Methotrexate (for chemotherapy)

How does this medicine work?

Methotrexate (meth-o-trex-ate) destroys cancer cells by interfering with a specific phase of the cell's life cycle. It can also be used to treat other medical conditions. (See the education sheet "Methotrexate for immune disorders.")

How is it given?

Methotrexate is given as a tablet, or by injection into the vein (IV). Methotrexate is usually given weekly. Pick a day of the week and **always** give it on that day to keep a steady level in the bloodstream. Your child should be awake and alert when taking any medicine.

For children who cannot swallow tablets:

1. Put on gloves.
2. Crush the tablet in a tablet crusher or between 2 spoons inside a clear plastic bag.
3. Mix the powder with a **very small** amount (about 1 teaspoon) of soft food, such as applesauce, chocolate syrup, jelly, or water. Make sure your child takes all of the mixture.
4. Wash spoons and container right after use. Discard the plastic bag and gloves.

Do not mix medicine into hot drinks, because the heat may destroy its effectiveness.

Are there any precautions about food or other medicines?

Avoid giving this medicine with milk products, since they can decrease absorption of the medicine.

Avoid alcohol-containing foods, beverages, or over-the-counter medicines such as cough syrup while taking this medicine.

Avoid taking ibuprofen products, aspirin, vitamin C, and Bactrim/Septra[®] during high doses. If your child is taking Dilantin[®], talk with your doctor. **Do not take** folic acid supplements while taking methotrexate, unless your doctor tells you to.

Check with the doctor, nurse practitioner, or pharmacist before giving **any** other prescription or non-prescription medicines, herbs, or vitamins.

What should I do if a dose is missed?

If one dose is missed, give it as soon as you remember.

If your child vomits within 30 minutes after receiving a dose, give it again. If your child vomits after 30 minutes, do not repeat the dose.

Call the oncology clinic or your doctor if more than one dose is missed or vomited.

What are the side effects?

Side effects increase with higher doses.

Low-dose side effects are:

- | | |
|------------|--|
| Common | <ul style="list-style-type: none">• low blood cell counts |
| Occasional | <ul style="list-style-type: none">• nausea, vomiting• hair loss• eye and skin sensitivity to the sun |
| Rare | <ul style="list-style-type: none">• mouth sores• liver damage |

Moderate to high doses can cause:

- | | |
|------------|---|
| Common | <ul style="list-style-type: none">• low blood cell counts• nausea, vomiting |
| Occasional | <ul style="list-style-type: none">• hair loss• sensitivity to the sun• mouth sores• loss of appetite• diarrhea• rash |
| Rare | <ul style="list-style-type: none">• tiredness• osteoporosis (weakened bones)• kidney, liver, or lung damage |

Spinal fluid administration can cause:

Central nervous system changes such as

- drowsiness
- blurred vision
- headache or backache
- tingling or numbness in arms or legs
- seizures

When should I call the clinic?

- fever
- sore throat
- bleeding or bruising
- shortness of breath
- pain while urinating
- mouth sores
- continued diarrhea or vomiting
- central nervous system changes as above
- exposure to chickenpox, which can be more serious in a child taking methotrexate
- signs of allergic reaction:
 - rash or hives
 - wheezing
 - trouble breathing - **call 911**

What else do I need to know?

Continued nausea, vomiting, diarrhea, or mouth sores may require a change in the dose or stopping the medicine for a while.

Leucovorin may be given to decrease side effects of high doses of methotrexate.

Blood samples may be needed to check the effects of the medicine.

Prevent sunburn. During treatment and for one year after, use sunscreen (SPF 30 or higher), a hat, and protective clothing when outdoors.

All caregivers should wear gloves when handling urine, stool, and vomit while your child is receiving the chemotherapy and for 48 hours afterward. Urine, stool, and vomit can be safely disposed of in septic tanks and the sewer system.

Any clothing or bed linens that are contaminated with urine, stool, or vomit should be washed separately from other laundry in hot water and detergent. Anyone handling the contaminated laundry should wear gloves.

You and your child should know the names of all the medicines he or she is taking. **Share this information** with anyone involved in your child's care.

Always make sure you have enough medicine on hand. Each time you refill your prescriptions, check to see how many refills are left. If no refills are left the pharmacy will need 2 or 3 days to contact the clinic to renew the prescription.

Before giving the first dose, read the label. Be sure it is what was prescribed. After a refill, if the medicine looks different to you, ask your pharmacist or call the oncology clinic before giving it.

Check the label for the expiration date. Bring outdated or extra medicines back to the clinic or pharmacy for disposal. Do not flush them down the toilet or throw them in the garbage.

Store all medicines in their original container and away from direct sunlight or heat. Do not store in humid places such as the bathroom. Keep them out of children's reach, locked up if possible.

If too much or the wrong kind of chemotherapy medicine is taken, call the oncology clinic right away. If your child is unconscious or has a seizure, **call 911**.

Questions?

This sheet is not specific to your child but provides general information. If you have any questions, please call the oncology clinic or pharmacy.

For more reading material about this and other health topics, please call or visit the Family Resource Center library, or visit our Web site: www.childrensmn.org.

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