

### Medication Names

**Prototype Med** Methotrexate (Rheumatrexate, Trexall)

**Other Meds** Leflunomide (Arava)

**Drug Class:** Antineoplastic

**Action:** Slows or stops the progression of RA because of their immunosuppressive effects, also treats cancer in much larger doses.

### Therapeutic Use

Decrease joint inflammation and subsequently joint damage

### Adverse Drug Reactions

Bone marrow suppression (Decrease platelets, red and white blood cells)

Increased risk of infection

Liver damage

Gastrointestinal ulceration

Pulmonary fibrosis

Dizziness and headache

Nausea and vomiting

### Nursing Interventions

Monitor for decreased platelets, red and white blood cell counts

Monitor for signs and symptoms of infection

Monitor liver function tests and observe for jaundice

Monitor for gastrointestinal bleeding (with methotrexate).

Monitor for respiratory distress and decreased oxygenation

Monitor for abdominal pain, diarrhea, nausea and vomiting

### Drug Administration

Give methotrexate once a week via route prescribed (oral, subcutaneous, or intramuscular)

Folic acid supplement may be prescribed to decrease risk of toxicity

### Patient Education

Report abnormal bleeding, bruising, or petechiae (pinpoint areas of blood under the skin). Report ulcerations of the mouth or tongue.

Report signs and symptoms of infection immediately.

Avoid ingesting alcohol.

Report yellowing of the skin and eyes immediately.

Report blood in vomitus or stools.

Report difficulty breathing or shortness of breath.

Drink adequate amounts (2L) of water daily to ensure excretion of drug.

Follow advice of Healthcare provider regarding contraception for men and women of child bearing age

Avoid breastfeeding while on this drug.

### Contraindications

Teratogenic (methotrexate)

Liver insufficiency or hepatitis

Renal insufficiency

### Precautions

Peptic ulcer or ulcerative colitis

Active bacterial or viral infections

### Interactions

Concurrent use of methotrexate and digoxin may reduce digoxin level

Concurrent use of methotrexate and NSAIDs, salicylates, and sulfonamides may cause toxicity.

Caffeine may reduce the effectiveness of methotrexate

Concurrent use of warfarin may increase the risk for bleeding

Alcohol use may increase risk of hepatotoxicity

