



Methotrexate

This leaflet is offered as a guide to you and your family. The possible benefits of treatment vary; for some people chemotherapy may reduce the risk of the cancer coming back, for others it may control the cancer and its symptoms. Chemotherapy is the most commonly prescribed anti-cancer treatment but other types of treatment are also used. Your doctor will explain to you whether you will receive chemotherapy or another type of treatment, or a combination of both. Your doctor or nurse will be happy to answer any questions you have about your treatment. You will find it useful to refer to the booklet *Chemotherapy, a guide* which gives general information on chemotherapy and side effects.

Your treatment

Your doctor or nurse clinician has prescribed for you a treatment which includes the chemotherapy methotrexate.

Methotrexate is given directly into the vein via a drip with fluids. You will usually be admitted for approximately 3 days per dose.

Before you are given methotrexate, we will test your urine to make sure that it is not acidic. This is to make sure that your body can remove the residues of the chemotherapy through the urine. We will continue to test your urine throughout the treatment and give you medication to prevent your urine from becoming acidic.

After your chemotherapy, we will routinely test your blood to see how much methotrexate is left in your blood. We will give you a medication called folinic acid as an injection or a tablet to help your body recover. This is called the folinic acid rescue. The dose of folinic acid and the length of the time you need to have this depends on the results of your blood test.

You will have a routine blood test before the start of each cycle of treatment.

You may also receive a drug called asparaginase. There is a separate information leaflet for this.

Medicines to be avoided on this regimen: Do not take any medicines that contain aspirin, ibuprofen or co-trimoxazole. Be careful! Some cold remedies and painkillers contain aspirin and ibuprofen. Check with your pharmacist and tell them you are having treatment with methotrexate. Please ask your doctor at the Christie for advice about any other medication you are taking, including non-prescribed medicines, complementary therapies and herbal medicines.

This treatment can have serious or possibly life-threatening side effects. It is very important that you report side effects straight away. Don't delay, if you feel unwell, please ring The Christie Hotline on 0161 446 3658. The lines are open 24 hours a day.

Possible side effects

Chemotherapy can cause many different side effects. Some are more likely to occur than others. Everyone is different and not everyone gets all the side effects. Most side effects are usually temporary, but in some rare cases they can be life-threatening. It is important to tell your hospital doctor or nurse about any side effects so they can be monitored and, where possible, treated.

Common side effects (more than 1 in 10)

Increased risk of serious infection

You are vulnerable to infection while you are having chemotherapy. Minor infections can become life-threatening in a matter of hours if left untreated. Symptoms of infection include fever, shivering, sweats, sore throat, diarrhoea, discomfort when you pass urine, cough or breathlessness. We recommend that you use a digital thermometer so you can check your temperature. You can buy one from your local chemist.

If you feel unwell, you have symptoms of an infection or your temperature is 37.5°C or above or below 36°C contact The Christie Hotline straight away.

- **Anaemia (low number of red blood cells)**

While having this treatment you may become anaemic. This may make you feel tired and breathless. Let your doctor or nurse know if these symptoms are a problem. You may need a blood transfusion.

- **Bruising or bleeding**

This treatment can reduce the production of platelets which help the blood clot. Let your doctor know if you have any unexplained bruising or bleeding, such as nosebleeds, bloodspots or rashes on the skin, and bleeding gums. You may need a platelet transfusion.

- **Nausea and vomiting (sickness)**

The severity of this varies from person to person. Anti-sickness medication may be given along with your chemotherapy to prevent this. You may also be given anti-sickness tablets to take at home. If you continue to feel or be sick, contact your GP or this hospital, because your anti-sickness medication may need to be changed or increased.

- **Lethargy**

Some chemotherapy may make you feel tired and lacking in energy. It can be frustrating when you feel unable to cope with routine tasks. If you do feel tired, take rest and get help with household chores. If necessary, take time off work. Gentle exercise such as walking can be beneficial.

- **Hair loss**

Hair loss is usually total. The hair falls out gradually 10 to 14 days following your first course of treatment. The time scale varies from person to person. Please remember that this is a temporary side effect and your hair will grow back when your treatment is completed. If you would like an appointment with the wig service, this can be arranged for you. Ask the staff for a copy of the 'Wig Fitting Service at the Christie'.

- **Kidney function**

Methotrexate can affect your kidney function. To prevent this from happening, an alkaline medication called sodium bicarbonate is given as a drip or as tablets. Your kidney function will be closely monitored during and after your treatment.

- **Diarrhoea**

If this becomes a problem while you are having treatment, anti-diarrhoea medication can be prescribed by your GP for a temporary period until this is resolved. If this problem persists contact this hospital for advice.

Uncommon side effects (less than 1 in 10)

- **Sore mouth**

Your mouth may become sore or dry, or you may notice small mouth ulcers during this treatment. Drinking plenty of fluids and cleaning your teeth regularly and gently with a soft toothbrush can help to reduce the risk of this happening. We can prescribe a mouthwash for you to use during treatment. You can dilute this with water if your mouth is sore. Ask your doctor or nurse for further advice. There is also general mouth care information in the chemotherapy booklet. If you continue to have a sore mouth, please contact The Christie Hotline.

- **Sore eyes**

You may get a dry, gritty feeling in your eyes following treatment. If this happens, using Hypromellose eye-drops will help to ease the discomfort. If the problem persists contact this hospital. Your eyes may also water. This will improve in time and needs no specific treatment.

- **Sensitivity to the sun**

Some chemotherapy can make your skin more sensitive to the sun than usual. Sit in the shade, avoid too much sun and use a high factor sunblock cream. Asian and African-Caribbean people may develop noticeable light patches on their skin.

Rare side effects (less than 1 in 100)

- **Extravasation** is when chemotherapy leaks outside the vein. If you develop redness, soreness or pain at the injection site **at any time** please let us know straightaway.

Serious and potentially life threatening side effects

In a small proportion of patients chemotherapy can result in very severe side effects which may rarely result in death. The team caring for you will discuss the risk of these side effects with you.

Sex, contraception & fertility

Protecting your partner and contraception: We recommend that you or your partner use a condom during sexual intercourse while you are having the course of chemotherapy. Chemotherapy is dangerous to unborn babies and this will also protect you and your partner from any chemotherapy drugs that may be present in semen and in the vagina. If you suspect that you may be pregnant please tell your doctor immediately. For some treatments it is advised that contraception is used and pregnancy is avoided for 6-12 months after the last dose of treatment. If you have received one of these treatments the medical team will discuss this with you.

Fertility: This chemotherapy may affect your ability to have children. Your doctor or nurse should have discussed this with you. If not, please ask them before you start treatment.

Late side effects

Some side effects may become evident only after a number of years. In reaching any decision with you about treatment, the potential benefit you receive from treatment will be weighed against the risks of serious long term side effects to the heart, lungs, kidneys and bone marrow. With some drugs there is also a small but definite risk of developing another cancer. If any of these problems specifically applies to you, the doctor will discuss these with you and note this on your consent form.

Contacts

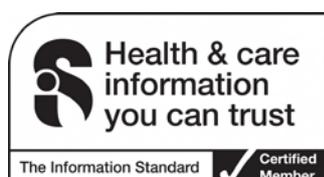
If you have any general questions or concerns about your treatment, please contact the Haematology and Transplant Unit.

- Jo Tomlins, Haematology Nurse Clinician 0161 446 8010
- Haematology and Transplant day unit 0161 446 3924
- General enquiries 0161 446 3000
- For urgent advice ring The Christie Hotline 0161 446 3658 (24 hours)

Your consultant is:

Your hospital number is:

Your key worker is:



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Details of the sources used are available, please contact Patient.Information@christie.nhs.uk

The Christie Hotline 0161 446 3658