Methotrexate

【OMTX】Methotrexate® 2.5mg/Tab *ATC Code：L01BA01*

中文名： 滅殺除炎錠 《美商惠氏》

適應症： 免疫系統相關疾病、腫瘤、移植後排斥、白血病。類風濕性關節炎、異位性皮膚炎、乾癬、濕疹等。

藥理分類： **Antineoplastic Agent, Antimetabolite (Antifolate); Antirheumatic, Disease Modifying; Immunosuppressant Agent.**

用法用量： **Administration:**

- Orally taken without regard to meals.
- Administer folic acid or folinic acid to reduce the risk of methotrexate adverse reactions

Indications and dosage regimens:

Choriocarcinoma & similar trophoblastic diseases:

Adults, 15-30 mg/day for a five-day course. Such courses are usually repeated for 3 to 5 times as required, with rest periods of one or more weeks interposed between courses, until any manifesting toxic symptoms subside.

Acute lymphatic (lymphoblastic) leukemia:

Adults & children, 3.3 mg/m^2/day for 4-6 weeks or until remission occurs, then 30 mg/m^2/wk twice weekly.

Burkitt's tumor:

Adults, stage I or II 10-25 mg/day for 4 to 8 days with 7-10 days rest intervals. Lymphosarcoma stage III may respond to combined drug therapy with MTX 0.625 to 2.5 mg/kg/day.

Antineoplastic:

Adults, 2.5-5mg/day. Dose modifications are based on toxicity.

Psoriasis (severe):

- Adults, 10-25 mg as single weekly dose. Dosages in each schedule may be gradually adjusted to achieve optimal clinical response; 25 mg/wk should not ordinarily be exceeded. OR
- 2.5mg ~ 5mg Q12h × 3 doses/wk, increase dose by 2.5 mg/week if needed, maximum: 25 mg/week. (仿單)

Rheumatoid arthritis:

- Initial: 7.5 to 15 mg once weekly. Increase dose by 2.5 to 5 mg/week every 4 to 12 weeks if needed based on response (maximum: 25 mg/week).
- Once disease remission is achieved, may gradually reduce dose (eg, by 2.5 mg/week every 1 to 2 months) to 15 mg/week to limit adverse effects.

Mycosis fungoides (advanced):

Adults, 2.5-10 mg daily for weeks or months.

腎功能障礙患者之劑量調整：

Clcr (mL/min)	劑量調整	頻次調整
61-80	75%	或根據血中濃度調整劑量
51-60	70%	或根據血中濃度調整劑量
10-50	30-50%	或根據血中濃度調整劑量
10	不建議使用	或根據血中濃度調整劑量

肝臟疾病患者之劑量調整：

Bilirubin 3.1-5 mg/dL or AST > 180，劑量減為 75%；

Bilirubin > 5 mg/dL，不建議使用。

不良反應： 骨髓抑制、白血球減少、潰瘍性口腔炎、胃腸障礙、肝腎機能障礙、過敏。

注意事項：

1.補充足夠的水份，以增加尿液排出量。

2.本藥會使病患之抗菌力降低，應避免與有傳染病的人接觸；如有任何感染症狀如發燒、發冷、喉嚨痛、下背或腹側痛、排尿困難或疼痛，應立即就醫。

3.服用此藥時，除非醫師指示，否則不可施打預防針、疫苗；與病患親近的人（例如家人）也應避免服用口服小兒麻痺疫苗。

交互作用：

- 氫離子幫浦抑制劑(PPI) ：↑MTX level，risk of intoxication。尤其是腎功能不全的病人，應避免併用 PPI 與高劑量的 Methotrexate。
- Amiodarone：以 MTX 治療乾癬的病人，投予 amiodarone 會造成皮膚潰瘍。
- Leflunomide: ↑ exposure of methotrexate and ↑ risk of hepatotoxicity and bone marrow toxicity.
- Penicillin, Amoxicillin: ↑ risk of methotrexate toxicity.
- NSAIDs, Dicloxacillin, Hydrochlorothiazide: ↑ methotrexate exposure.
- Phenytoin: ↓ phenytoin effectiveness and an ↑ risk of methotrexate toxicity (myelotoxicity, pancytopenia, megaloblastic anemia).
- Tamoxifen: ↑ risk of thromboembolism.
- Warfarin: ↑ risk for elevated INR and subsequent bleeding.
- Amiodarone: ↑ risk of methotrexate toxicity (leukopenia, thrombocytopenia, anemia, nephrotoxicity, mucosal ulcerations).

懷 孕 期： **除非確定沒有懷孕，本藥不得使用於可能懷孕之婦女。**懷孕婦女服用 MTX 會引起胎兒死亡、胚胎毒性、流產及致畸形作用。對患有乾癬或類風濕性關節炎之懷孕病人，本藥仍屬禁忌。配偶之任何一方如在用藥期間應避免受孕。配偶之任何一方中斷 MTX 治療與可受孕之理想的時間間隔尚未確定。建議時間間隔為三個月至一年。

授 乳 期： Methotrexate 曾在人乳中檢測出來，因此 methotrexate **禁止於哺乳期使用**。

儲　　存： 避光儲存。