



Methotrexate for JIA

This leaflet is for children, young people and their parents and carers. It explains about a drug called Methotrexate, used to treat Juvenile Idiopathic Arthritis (JIA). As the drug is very powerful, it is important that you have regular blood tests to monitor your health. It is also important to understand that the drug can cause side effects and this leaflet explains what to look out for and what to do if you experience any of these symptoms.

What is Methotrexate?

Methotrexate is a special drug that helps to reduce the amount of inflammation in your body. It is a disease modifying anti-rheumatic drug (DMARD) that suppresses the immune system in people with conditions like JIA. It is taken alongside steroids so the steroid course can be kept as short as possible, as long term steroid medication can affect children's growth.

Inflammation of the joints can cause swelling, heat, redness, pain and stiffness. Methotrexate helps to reduce these symptoms for you.

How to take Methotrexate

Methotrexate can be given as a tablet, a liquid or an injection, and is taken once per week. Some people prefer to have the injection as it can cause less side effects (such as tummy upset). Parents and older children are taught to give the injection at home, so you don't have to come to the hospital every week.

It can take up to 12 weeks for Methotrexate to work fully but it is important to keep taking it, even if you don't notice a difference straight away. We often give steroid medication for the first few weeks to offer extra support while we wait for the Methotrexate to start working.



Side effects of Methotrexate

Some children, particularly younger children, will have no side effects at all from Methotrexate. However, some children might notice the following:

- Tummy ache and feeling sick
- Headaches
- Diarrhoea
- Shortness of breath
- Mouth ulcers
- Hair loss / minor hair thinning
- Rash

We will give you a medication called **Folic Acid** alongside Methotrexate which helps to reduce these side effects. You can take this medication two days after the Methotrexate is given, but you can take it more often if the symptoms are worse. However, **it cannot be given on the same day as the Methotrexate.**

If you are struggling with side effects or you or your parents/carers are worried about any symptoms, please email the team at rbb-tr.paedsrheum@nhs.net

Alternatively you can call us on: **0118 322 7531** and select Option 2 to speak with the Paediatric Admin Team.

Other risks to be aware of

Because Methotrexate affects the immune system, you may be more likely to catch other infections and bugs. It is really important to tell us when you are unwell, especially if you are off school with a high temperature or if you are taking antibiotics. If this is the case, then the dose of Methotrexate should be missed that week.

Symptoms to look out for and contact us about:

- Persistent sore throat
- High fever
- Unexplained bruising or bleeding
- Mouth ulcers
- Feeling or being sick
- Dark coloured urine
- Cough and shortness of breath
- Yellowing of the skin or eyes, known as jaundice

Please contact us urgently if you develop chickenpox or shingles, or come into close contact with someone who does. Close contact means being in the same room for more than 15 minutes. Sometimes, these infections become serious and we can give you anti-viral medication called Acyclovir also known as Aciclovir to help to prevent this.

Vaccinations

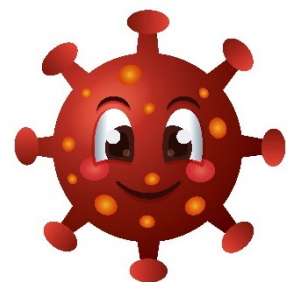
Flu jab: Children taking Methotrexate can be at risk of serious complications if they catch bugs like the flu.

If you are **only** taking Methotrexate, it is important that you have the flu jab every year from the age of 6 months. You can have the live intranasal flu vaccine which is usually given by the school nurses, but it can also be given by the GP if the child is not in mainstream education.

If you are taking Methotrexate **and** another medication (such as a biologic), you must **not** have live vaccines and will need to have the inactive injection version from your GP.

If you need more advice about which vaccines are suitable and safe, please email us at rbb-tr.paedsrheum@nhs.net.

Other vaccines: Children taking Methotrexate cannot have other live vaccines such as MMR, Shingles, Rotavirus, oral Typhoid, Varicella and Yellow Fever. They can have inactivated (non-



live) vaccines such as HPV which is given at secondary school.

Please always check with your GP practice or the rheumatology team if you are unsure whether a vaccine is live or not.

Covid-19 vaccine: The COVID-19 vaccination is safe to have with rheumatology medications.

Blood tests

Methotrexate affects the immune system but it can also affect your liver. Therefore it is important that we monitor your blood while you are taking Methotrexate so that we can keep you safe. This will involve regular blood tests at the hospital. Please use the table on the next page to help record when the blood tests are needed.

The team will have discussed this with you already. We will let you know the results of the blood tests, and if you can continue on with Methotrexate

For your first appointment, please call our Paediatric Observation Bay on 0118 322 8998, and ask for the first appointment (telling them you are under the care of Dr Wolfenden and are taking an immunosuppressant). When you attend, please take this table with you, and for all subsequent appointments:

Weeks since starting treatment	Date and time of blood test
2 weeks	
4 weeks	
8 weeks	
12 weeks	
16 weeks	

After this, you will need a blood test **every 3 months**, unless the medical team advises otherwise.

Information adapted from Versus Arthritis:

[Drug information - methotrexate information booklet \(versusarthritis.org\)](https://www.versusarthritis.org)

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

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