

TRIMETREXATE

Other NAMES: NeuTrexin®

WHY is this drug prescribed?

Trimetrexate is used in the treatment of moderate to severe cases of *pneumocystis carinii* pneumonia (PCP) in patients with AIDS. Other less common uses for this drug include the treatment of a number of different forms of cancer (colorectal, head, neck and lung). Trimetrexate is usually used if a patient has experienced toxic adverse effects or does not respond to more traditional therapy such as trimethoprim-sulfamethoxazole (TMP-SMX, Septra®, Bactrim®), dapsone/trimethoprim or pentamidine.

HOW should this drug be taken?

For the treatment of PCP in patients who are immunocompromised (eg. AIDS patients), trimetrexate is given intravenously (I.V.) over 60 to 90 minutes once daily for a total period of 21 days. The actual dose is determined by your weight.

Another agent called leucovorin (folinic acid) is given every 6 hours along with trimetrexate and must be continued for 72 hours following the last dose of trimetrexate. Leucovorin may be given intravenously or taken orally (tablet). It is very important that leucovorin is taken at the recommended dose and duration since it prevents/minimizes the risk of

potentially serious and life threatening toxicity.

What should you do if you FORGET a dose?

Your dose of trimetrexate will be given to you by your nurse or doctor. It is important that you keep your doctor and laboratory appointments, so that you receive all your trimetrexate doses. Keeping your appointments will also ensure that your progress can be assessed regularly.

What ADVERSE EFFECTS can this drug cause? What should you do about them?

Trimetrexate can cause several potentially serious adverse effects that are preventable. Many of these affect the blood.

Decreases in white blood cells (needed to help fight infection), **red blood cells** (needed to help carry oxygen around your body), **and platelets** (needed to help your blood clot) can occur. It is important to keep your appointments for regular blood work so that any changes can be monitored. Please inform your doctor if you develop symptoms such as fever, chills, shortness of breath, rapid heartbeat, fatigue, bleeding or bruising.

Trimetrexate may also cause some reversible toxicities to your kidneys and liver. Your kidney and liver function will be monitored through your blood tests.

You may experience **nausea, vomiting**, and develop **stomatitis** (inflammation and sores in the mouth). Taking leucovorin with your trimetrexate may help reduce/eliminate the risk of experiencing many of these effects.

Rarely, an **allergic reaction** to trimetrexate with skin rash, fever, chills, and difficulties breathing can occur. Consult a doctor immediately if these symptoms arise.

It is important that you keep your doctor appointments and come for your laboratory tests so that your progress can be followed.

What other precautions should you follow while using this drug?

Trimetrexate may interfere with other drugs. These interactions may lead to increased drug toxicity or a decreased benefit of the drug. Inform your doctor and pharmacist of all prescribed and non-prescribed drugs you are taking. As well, you should inform them of natural products you are taking. If you wish to start a new drug or natural product, please consult with your pharmacist before doing so.

Drugs to avoid if possible while you are taking trimetrexate include zidovudine (Retrovir®). Drugs to use cautiously while you are taking trimetrexate include:

- cimetidine (Tagamet®)
- erythromycin (Erybid™, Eryc™)

- fluconazole (Diflucan™)
- itraconazole (Sporanox®)
- ketoconazole (Nizoral®)
- rifabutin (Mycobutin®)
- rifampin (e.g. Rifadin®, Rimactane®, Rofact™)

Since the **liver** and **kidneys** are important in helping to break down and eventually eliminate trimetrexate from the body, it is important to let your doctor know if you have a history of liver or kidney disease.

The use of trimetrexate is NOT recommended during pregnancy. Please inform your doctor if you are pregnant. Breastfeeding is NOT recommended if you are receiving trimetrexate. In general, breastfeeding is NOT recommended if you have HIV as you can transmit the virus to your baby through your breast milk.

If while handling the drug, it accidentally spills, avoid contact with your skin, eyes, or mucous membranes (eg. nose). Wear rubber gloves while cleaning up any spills. If the drug comes in contact with your skin or mucous membranes, wash the area thoroughly with soap and water, and rinse thoroughly with water.

How should this drug be STORED?

Once diluted, the trimetrexate solution is stable at room temperature (15-25°C) or under refrigeration (2-8°C) for up to 24 hours. Your nurse will ensure that there are no particles in the solution and that

it is not discolored. Keep well out of the reach of children.

If you have any questions or concerns about this drug or if you are experiencing adverse effects, please discuss them with your pharmacist, doctor or nurse.

Write questions or concerns down to ensure they are addressed.

The following pharmacist is available to answer questions:

Pharmacist: _____

Telephone: _____

Reference: Product Monograph NeuTrexin® (trimetrexate glucuronate). Gaithersburg, MD, USA: MedImmune Oncology Inc., 2000. Prepared by the Ontario HIV Pharmacy Professional Specialty Group, 2003.

Additional medication fact sheets and updates may be found at: www.hivclinic.ca

TRIMETREXATE

MEDICATION

FACT SHEET