

Checklist for governance of low-dose methotrexate in hospitals

Version 1 – 2021

Introduction

The Council of Australian Therapeutic Advisory Groups (CATAG) Position Statements support medicine governance committees* in achieving effective medicines management governance and promote national consistency. The *Position Statement on the use of low-dose methotrexate* provides guidance regarding dispensing and administering low-dose methotrexate (oral and subcutaneous dosage forms) as immunomodulatory therapy for a variety of autoimmune conditions.

About this checklist

This checklist is based on the recommendations of the low-dose methotrexate position statement and should be used to identify any gaps and/or areas for improvement in your hospital or health service.

Each section commences with recommendations, followed by a list of questions, which can be answered 'Yes' or 'No'. The questions relate to any policies, procedures or guidelines that your hospital or health service organisation have regarding the dispensing and administration of low-dose methotrexate used as immunomodulatory therapy for a variety of autoimmune conditions. If the answer to a question is 'No', this is an area the committee may wish to investigate further and endeavour to improve.

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* Medicines governance committees include drug and therapeutics committees, medicines advisory committees or equivalent, medication safety committees.

SUPPORTING SAFE PRACTICES FOR LOW-DOSE METHOTREXATE		YES	NO	COMMENT
<p>Is there a policy, procedure or guideline that discusses the use of low-dose methotrexate in your hospital or health service organisation?</p> <p>i If the answer is 'No', use this checklist to assist in development of a policy/procedure/guideline on low-dose methotrexate.</p>				
<p>Recommendation 1: Methotrexate is not considered chemotherapy at low doses.</p>	<p>Does your policy, procedure or guideline recommend not labelling low-dose methotrexate as chemotherapy or cytotoxic by pharmacists?</p>			
<p>Recommendation 2: The risk of harm from occupational exposure is low when handling low-dose methotrexate tablets.</p>	<p>Does your policy, procedure or guideline differentiate between the handling of low dose methotrexate (as immunomodulatory therapy) and high dose methotrexate?</p> <hr/> <p>Does your policy, procedure or guideline recommend a 'non-touch' technique for the dispensing or administering of low-dose methotrexate (intact whole tablets)?</p> <p>i Non-touch technique involves removing the correct dose/ volume of oral medicine from its container and placing into a medicine cup without touching the medicine.</p> <p>i The risk of harm from occupational exposure, during the dispensing or administering of whole tablets is low. Additional precautions intended for handling antineoplastic medicines are not necessary. As is the case for all medicines, a 'non-touch' technique should be used. The use of personal protective equipment should be guided by local policy and procedure.</p> <hr/> <p>Does your policy, procedure or guideline recommend that women who are pregnant or trying to conceive are excluded from handling all dosage forms of methotrexate?</p>			

SUPPORTING SAFE PRACTICES FOR LOW-DOSE METHOTREXATE		YES	NO	COMMENT
<p>Recommendation 3:</p> <p>For subcutaneous low-dose methotrexate, doses from pre-filled syringes are preferred to those prepared from a vial.</p>	<p>Does your policy, procedure or guideline recommend the use of pre-filled syringes of low-dose methotrexate for subcutaneous administration?</p>			
	<p>Does your policy, procedure or guideline recommend health professionals administering low-dose methotrexate injections only wear disposable gloves?</p> <p>i As is appropriate for all injections, health professionals administering low-dose methotrexate injections should wear disposable gloves. It is suggested that aprons, goggles or masks are not necessary when administering pre-filled methotrexate syringes.</p>			
<p>Recommendation 4:</p> <p>People undergoing treatment with low-dose methotrexate do not need to avoid close person-to-person contact or use special precautions when disposing of their bodily fluids.</p>	<p>Does your policy, procedure or guideline provide guidance for people being treated with low-dose methotrexate, that they do not need to avoid close person-to-person contact or use special precautions when disposing of their bodily fluids?</p>			

SUPPORTING SAFE PRACTICES FOR LOW-DOSE METHOTREXATE		YES	NO	COMMENT
<p>Recommendation 5: Provide clear information and advice to people on low-dose methotrexate at every opportunity.</p>	Does your policy, procedure or guideline recommend educating and counselling people on low-dose methotrexate at each opportunity?			
	Does your policy, procedure or guideline provide clear guidance on what information (e.g. CMI, patient leaflets) in addition to verbal counselling should be given to patients prescribed low-dose methotrexate?			
	Does your policy, procedure or guideline include that label 21: 'Special handling and disposal required – ask your pharmacist' when dispensing low-dose methotrexate is not required for people undergoing treatment with low-dose methotrexate?			
	Does your policy, procedure or guideline include all of the following information for labelling of low-dose methotrexate? <ul style="list-style-type: none"> • Specify the dose on the label • Specify the day of the week (written in full, not abbreviated) to be taken • Use the phrase 'each week' NOT 'weekly' (e.g. 'Take 1 tablet on Wednesday each week') • Avoid 'As directed' • Affix a 'To be taken once a week only' sticker to the dispensed methotrexate container • If packing a dose administration aid, ensure it is packed correctly ONCE each week. 			