Introduction
This is a step-by-step guide to help you give yourself an injection of methotrexate by subcutaneous (under the skin) injection. The hope is that this will give you effective treatment for your arthritis as well as more control and independence. If you decide you do not wish to inject yourself at any time please discuss this with your rheumatology nurse at an early stage so that another plan of treatment can be discussed. The National Patient Safety Agency (NPSA) has produced patient information sheets about methotrexate, which you should have been provided with before starting methotrexate and you should also have had the chance to discuss this with your rheumatology nurse. If you have not received this information please request this from your rheumatology nurse.

What happens when you decide to inject methotrexate?
You will be:

- Given information to read about the drug and have time to ask questions.
- Shown how to prepare the things you need to inject yourself and give the injection.
- Given time to practice getting the injection ready and giving the injection with a nurse supervising.

When you have managed to do this and feel ready, you will be in a position to prepare and give the injection at home.

At each stage of the teaching process you will be given as much time as you need to ask questions and practise. When you feel ready, we will ask you to sign that you have been given enough support and training to be able to give your own injections. It is important that the rheumatology team know that you are confident and safe to continue with the next step. A final assessment will take place when you and the nurse are sure that you are competent to self-inject at home. You will then be asked to sign a consent form and record to say that you are able to do the injection safely and understand how to handle any possible problems. Make sure that these instructions and the Rheumatology advice line number are always close to hand in case you have any queries or problems.
Remember
It is safe for anyone to handle the methotrexate syringe sealed in the wrapper, but only people trained to handle methotrexate should touch the syringe or equipment once out of the wrapper. Please check manufacturers guidelines regarding storage of your methotrexate as some preparations may require refrigeration and should be stored in a non-transparent secure plastic box in the bottom of your fridge, if in doubt discuss this with your rheumatology nurse.

If you are uncertain about when not to give methotrexate, or if you need advice please remember to look at the information sheets you received or phone the rheumatology advice line. It is very important you follow this advice:-

- **Methotrexate is only ever given once a week, choose a day of the week to give your injection and stick to this.**
  - You must not handle or give methotrexate if you are trying for a baby or you think you might be pregnant or are breast-feeding.
  - You will need to use effective means of contraception whilst taking methotrexate (where appropriate).
  - Ensure methotrexate is kept out of sight and reach of children and pets.
  - Keep information about spillage close to hand.
  - Use injection sites shown and change site each time you inject.
  - Attend regularly for blood tests and follow-up appointments.
  - Avoid transporting methotrexate injections on public transport, if this is cannot be avoided refer to page 7(Travelling away from home when you inject methotrexate) and discuss with your rheumatology nurse first.

You will be given the date and time of your next outpatient appointment and blood test, information on repeat prescriptions, and telephone advice line number. If you do not have regular blood monitoring or attend appointments, you will not be given methotrexate.

**How to give a methotrexate subcutaneous injection**

*Getting the equipment ready:-*
Use the lid from your storage box as an injection tray, ensure the lid is clean.

- 1 methotrexate syringe for injection (if refrigerated, you can allow the injection to come up to room temperature by taking out of the fridge for 30 minutes).
- 1 needle
- 1 cytotoxic sharps bin
- 1 cotton wool ball
- 1 dot plaster
- Kitchen roll
- 1 pair of scissors
Preparing your work area:-

1. Wash and dry your hands thoroughly and clean your preparation area (e.g. Work surface, clean tray or lid)
2. Place equipment on preparation area (you may want to use a piece of kitchen roll on top of your clean surface)
3. Only people who are helping you should be present in the room (avoid distractions such as children and pets)
4. Wash and dry your hands once more, make sure you have all the equipment close at hand before you make yourself comfortable to give the injection.
5. You will need to change the injection site each week to reduce the risk of soreness
6. Use dedicated scissors to cut the top off the sealed bag containing the syringe and tip onto injection tray, and handle the syringe carefully. Do not tear bag open with teeth.

Giving the methotrexate injection:-

1. Sit comfortably.
2. Check expiry date, your name and dose is correct on syringe.
   If incorrect do not give and contact advice line or pharmacy.
3. Check that the contents of the syringe are a clear yellow fluid. If any particles or cloudiness is present do not give the injection and contact advice line or pharmacy.
4. If everything is correct peel open the needle packet.
5. Remove the screw stopper at the end of the syringe and screw the needle onto the syringe.
6. Loosen the needle cover. Do not allow the needle to touch the injection tray or anything else because this will contaminate it. If this happens discard the needle in the sharps box and use a new needle.
7. Place the ready syringe with needle cover loosely in place onto the injection tray.
8. Have a cotton wool ball ready and dot plaster if used.
9. Pick up the syringe and remove the needle cover. Hold the syringe low down the barrel as if you are going to write your name with a pen.
10. With your free hand pinch the skin where you are going to inject and insert the needle at right angles (90 degrees).
11. Once the needle is in place release the pinch on the skin and support the syringe with both hands. With your preferred hand push the syringe plunger slowly down and deliver the injection.
12. When you have injected all of the methotrexate remove the needle and syringe from your skin and put the syringe directly into the cytotoxic sharps bin and place a cotton wool ball firmly over the injection site.

13. When there is no leaking of fluid or blood from the injection site, apply a small dot plaster, which can be removed after half an hour.

What to do after the injection
Do not put any of the used items in your household waste. Put the used syringe, cotton wool ball, screw top, and packaging into the sharps bin. Store the bin out of sight and reach of children and closed, but not locked.

After the injection:-

1. Wash and dry your hands.
2. Replace the lid onto your methotrexate storage box.
3. Record date and site of injection in your diary sheet (if using).
4. If there is bleeding or bruising at the injection site or a small amount of blood in the very tip of the syringe do not worry. This sometimes happens if the needle has punctured a small blood vessel, and will soon stop and the bruising will fade.
5. On rare occasions methotrexate can leak into the surrounding skin causing irritation when patients give an injection. If this happens and it causes irritation or redness contact the rheumatology advice line.

Dealing with spillage
- Keep these instructions at hand when injecting and make sure your carer or family members know how to clean a spill up.
- The amount of methotrexate you are using is very small but it is still possible to spill it.
- If there is a spillage follow the instructions below.

Spillage onto the skin:-

Wash the affected area with plenty of soap and water and soothe any transient stinging with a bland cream. Do not scrub because unbroken skin provides protection. Contact your rheumatology nurse or own doctor if you have any adverse reactions.

Spillage into the eyes:-

Wash the eye(s) with plenty of water for at least five minutes. It is recommended that you should contact your own doctor or local hospital emergency department.
Spillage onto work surfaces and floors:-

Acting promptly and wearing a protective disposable apron and gloves cover the spillage with absorbent paper such as paper towels or kitchen roll. Make sure they surround the outside area and absorb all the fluid to prevent the methotrexate spreading, discard the used paper towels into the cytotoxic sharps bin. Wash the spillage area well with lots of water, then clean with soap and water and dry with paper towels or absorbent wipes. Discard all waste into the cytotoxic sharps bin. Repeat the process five times working from just outside the spillage into the central area. All protective clothing should be discarded in the cytotoxic sharps bin and sealed for collection and incineration.

Spillage onto clothing:-

Wear the protective rubber gloves and blot dry with paper towel or kitchen roll. Clothing should be removed immediately and washed separately from other clothing.

All equipment used to handle spillage should be placed into the cytotoxic sharps bin. You will need to ring the rheumatology advice line to arrange for disposal of the waste and for supply of further apron and gloves. If you have spilt and lost a treatment then you may not have enough methotrexate before your next prescription. Contact the rheumatology advice line to arrange for a further supply.

Accidental needle stick injuries

If you follow the instructions carefully the chances of you getting an accidental needle stick injury are very small. If you or your carer come into contact with the needle while preparing or disposing of the syringe it is important to make the puncture site bleed. Wash the area thoroughly with warm soapy water and cover with a plaster. Contact your own doctor and let your rheumatology department know that you have had a needle stick injury. They will record what has happened and check to see whether anything else can be done to ensure that this doesn’t happen again.

Travelling away from home when you inject methotrexate

Caution is needed in hot climates over 30 degrees centigrade. You need to discuss storage details with your rheumatology nurse. Your rheumatology nurse will also discuss other options available (such as using tablets instead of an injection, using a cool bag for travelling, having an injection before travelling and then one as soon as you return).
Needles and equipment must be stored in checked-in luggage, and not in your hand luggage. Check with your airline in plenty of time. You may need a supporting letter from the rheumatology department before you go away. Arrange vaccinations with your surgery well in advance of travelling and please remember you must inform them that you are receiving methotrexate and must not be given any live vaccinations (e.g. yellow fever).

**Collection and delivery of cytotoxic sharps bin**
An initial cytotoxic sharps bin will be provided by the rheumatology department following completion of competencies assessment with the rheumatology nurse. To arrange collection and delivery of a new cytotoxic sharps bin contact:- 01495 - 745656. When making a request for collection you will need to state that the sharps bin is cytotoxic (purple lid), and the size (printed on side of bin e.g. 5 litre), number of bins to be collected, also frequency of collection which will be as and when required.

**Rheumatology Advice Line**
You can use the advice line if you have any queries and need advice. The advice line is an answer phone service, and operates between Monday to Friday, 8.30am to 4.30pm. You need to leave your full name and telephone number and one of the rheumatology nurses will return your call usually on the same day depending on other commitments. If it is an emergency you need to contact your GP, NHS Direct or attend your local Accident and Emergency Department.

**Your Rheumatology advice line number is:-**
Nevill Hall Hospital, Abergavenny:- 01873 - 73 2046
St Woolos Hospital, Newport:- 01633 - 65 6251

**Reference:**

Approved by: Owner: A Haggett Clinical Nurse Specialist in Rheumatology