

# Minimizing Trimethoprim Usage In Patients Prescribed Methotrexate

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## **Background**

- Methotrexate is an Amber List DMARD and should be stopped in the presence of concurrent infection – can be difficult as administered weekly
- Trimethoprim first line treatment for UTIs in patients <65yrs</li>
- Potentially fatal interaction between Methotrexate and Trimethoprim
  - Both folate antagonists
  - Can precipitate rapid myelosuppression
  - BNF states can increase risk of nephrotoxicity

#### <u>Aim</u>

To review how many patients currently on Methotrexate had been prescribed Trimethoprim in the past 6 months

To raise awareness of the interaction between the two medications

To reduce co-prescribing events to zero and adhere to NI Medicines Governance "Medication Safety Today" Alert 2015\*

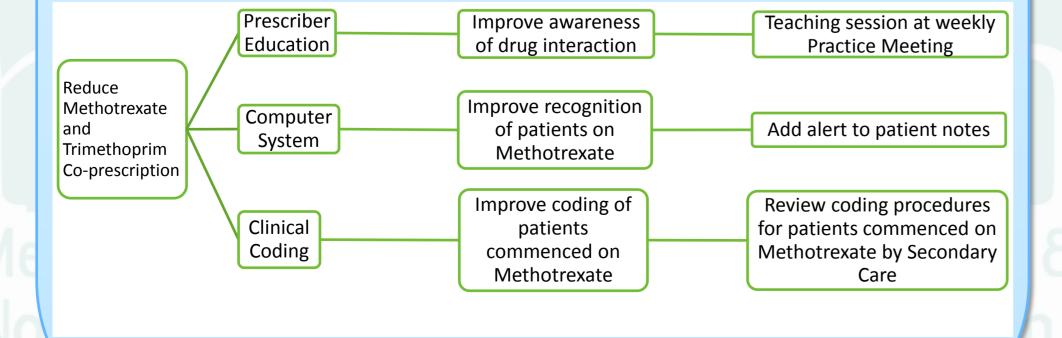
## **Improvement Methodology**

Plan: Review Methotrexate and Trimethoprim coprescription events within the previous 6 months

Do: Present findings to Partners at weekly Practice Meeting including teaching session on dangers of co-prescription

Study: Review co-prescription events in following 3 months

Action: Add alerts to patient records and consider protocol for clinical coding



## **Results**

- 2 Co-prescription events between August 2018 and February 2019
  - Review of patient records and ECR showed patients came to no harm
- No co-prescription events noted from February 2019 to May 2019

#### **Outcome Measure**

Number of patients co-prescribed Methotrexate and Trimethoprim

#### **Process Measure**

Ensure we are aware of when patients are on Methotrexate

Ensure all prescribers are aware of the interaction between Methotrexate and Trimethoprim

## **Balancing Measure**

Potential for "Alert Overload"

#### Outcome

- No co-prescription events in the following 3 months does show some improvement but further follow up will be necessary to ensure sustained improvement
- Prescribers more aware of interaction between medications and potential severity of this
- Alerts do slow initial consultation process as can be slow to load but useful reminder that patient on Methotrexate and not to prescribe Trimethoprim
- Responsibility for coding of Methotrexate currently with everyone creating inter-patient variability of alerts

### Next Steps

- Review coding procedure when patients commenced on Methotrexate to ensure alert added to all patient records – Could this be delegated to Practice pharmacist?
- Regular audit of co-prescription events to ensure ongoing compliance