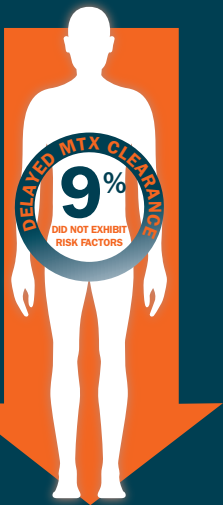






Patients who do not exhibit risk factors may experience delayed MTX clearance

The patient who does not exhibit the risk factors may experience delayed MTX clearance



## RISK FACTORS FOR DELAYED METHOTREXATE (MTX) CLEARANCE<sup>1-3</sup>

Patients who have one or more of the following risk factors may experience delayed MTX clearance:<sup>1,5-7</sup>



Renal impairment
Urine pH < 7
Concurrent use of nephrotoxic drugs or other factors
Concurrent use of P-glycoprotein inhibitors
Thrombocytopenia or neutropenia
Hypotension

Prior toxicity with HD-MTX

**DRUGS THAT IMPAIR MTX CLEARANCE.<sup>1,5-7</sup>**

Concomitant use of drugs that interfere with MTX excretion can increase MTX toxicity and should be avoided.



<b>Drug Class</b>	<b>Specific Agent*</b>
NSAIDs <sup>a</sup>	Ibuprofen, Naproxen, Salicylates
Antibiotics	Penicillin and penicillin derivatives, probenecid, trimethoprim-sulfamethoxazole, vancomycin, aminoglycosides
Proton Pump Inhibitors	Lansoprazole, Omeprazole, Rabeprazole, Pantoprazole, Esomeprazole
Antifungals	Amphotericin B
Other Chemotherapy	Carboplatin, Cisplatin, Oxaliplatin, Tyrosine kinase inhibitors (TKI)
Immunosuppressants	Cyclosporine
Agents	Radiographic contrast
Vitamins	Vitamin C

<sup>a</sup>NSAIDs, nonsteroidal anti-inflammatory drugs

\*This is not a comprehensive list of all specific agents that could inhibit renal function.



Identify early warning signs of HDMTX-induced AKI, even before an increase in serum creatinine, which is a lagging indicator.<sup>1,8</sup>

- Decreased Urine Output
- Positive Fluid Balance
- Weight Change
- Plasma MTX concentrations above the expected MTX level



Prolonged exposure to MTX can lead to an oncologic emergency and potentially irreversible life-threatening systemic toxicity and organ damage.<sup>8</sup>



**Visit [MTXPK.org](https://MTXPK.org) to see if your patient is clearing MTX as expected.**

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