



PSORIASIS

DIE: HYDRATE FOLATE REDUCATSE

Dr.heera Ramesh⁽¹⁾ - Dr.leelavathi B⁽¹⁾

Bangalore Medical College And Research Institute, Dermatology, Bangalore, India⁽¹⁾

Methotrexate(MTX) is a potentially toxic antimetabolite anticancer drug, which, in low doses, remains an effective and safe therapy for psoriasis. Low dose methotrexate therapy used in psoriasis rarely produces toxicity, and most of such cases occur due to failure to adhere to the recommended guidelines. Myelosuppression and gastrointestinal mucositis are primary toxic effects of methotrexate. Mucositis usually appears 3-7 days after the drug administration and precedes the onset of fall of leucocyte and platelet counts by several days. Ulceration of the psoriatic plaques in the skin due to methotrexate toxicity is extremely rare.

Here we are presenting a case series of 5 patients with methotrexate toxicity:

Case 1: A 60 year old male who is a known alcoholic had presented with ulceration over psoriatic plaques after consumption of 15mg methotrexate daily for 1 week and developed pancytopenia.

Case 2: A 33 year female patient with plaque type psoriasis on inj.MTX 15mg since 3 months presented with oral erosions and pustular cutaneous lesions

Case 3: A 55 year old male presented with ulcerations over psoriatic plaques after consumption of 15mg twice a day for 1 week and developed pancytopenia.

Case 4: A 58 year old male who is a known case of psoriasis on oral MTX presented with oral lesions. Complete haemogram showed pancytopenia and he had elevated liver enzymes.

Case 5: A 52 year old female who is a known case of rheumatoid arthritis on MTX presented with painful,hyperpigmented lesions and erosions in the mouth. Investigations:pancytopenia and raised liver enzymes.

