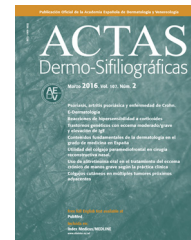




ACTAS Derma-Sifiliográficas

Full English text available at
www.actasdermo.org



SPECIAL ARTICLE

Methotrexate in Moderate to Severe Psoriasis: Review of the Literature and Expert Recommendations[☆]



J.M. Carrascosa,^{a,*} P. de la Cueva,^b M. Ara,^c L. Puig,^d X. Bordas,^e G. Carretero,^f L. Ferrándiz,^g J.L. Sánchez-Carazo,^h E. Daudén,ⁱ J.L. López-Estebarez,^j D. Vidal,^k P. Herranz,^l E. Jorquera,^m P. Coto-Segura,ⁿ M. Ribera^o

^a Servicio de Dermatología, Hospital Universitari Germans Trias i Pujol, Badalona, Barcelona, Spain

^b Servicio de Dermatología, Hospital Universitario Infanta Leonor, Madrid, Spain

^c Servicio de Dermatología, Hospital Clínico Universitario Lozano Blesa, Zaragoza, Spain

^d Servicio de Dermatología, Hospital de la Santa Creu i Sant Pau, Universitat Autònoma de Barcelona, Barcelona, Spain

^e Servicio de Dermatología, Hospital Universitario de Bellvitge, Hospitalet de Llobregat, Barcelona, Spain

^f Servicio de Dermatología, Hospital Universitario Gran Canaria Doctor Negrín, Las Palmas de Gran Canaria, Spain

^g Servicio de Dermatología, Hospital Universitario Virgen Macarena, Sevilla, Spain

^h Servicio de Dermatología, Hospital General Universitario de Valencia, Valencia, Spain

ⁱ Servicio de Dermatología, Hospital Universitario de la Princesa, Madrid, Spain

^j Servicio de Dermatología, Hospital Universitario Fundación Alcorcón, Alcorcón, Madrid, Spain

^k Servicio de Dermatología, Hospital Sant Joan Despí Moisès Broggi, Sant Joan Despí, Barcelona, Spain

^l Servicio de Dermatología, Hospital Universitario La Paz, Madrid, Spain

^m Servicio de Dermatología, Complejo Hospitalario de Huelva, Huelva, Spain

ⁿ Servicio de Dermatología, Hospital Universitario Central de Asturias, Oviedo, Asturias, Spain

^o Servicio de Dermatología, Hospital Universitari de Sabadell - Corporació Parc Taulí, Sabadell, Barcelona, Spain

Received 27 July 2015; accepted 5 October 2015

Available online 23 February 2016

KEYWORDS

Consensus development conference; Methotrexate; Psoriasis

Abstract Methotrexate (MTX) is the most frequently used conventional systemic drug in the treatment of psoriasis. Despite over 50 years of experience in this setting, certain aspects of the use of this drug in clinical practice are still little standardized and poorly understood. For this reason, a group of 15 experts took part in a consensus development conference to achieve consensus on a series of recommendations on the use of MTX in psoriasis. The guidelines, which were developed on the basis of a systematic review of the literature, were validated by 2 rounds of voting and categorized by level of evidence and grade of recommendation. Before MTX can be used to treat moderate to severe psoriasis, the patient must be evaluated to assess the suitability of the treatment, including consideration of vaccination status and screening for tuberculosis and pregnancy. The recommended starting dose for a patient with no risk factors

[☆] Please cite this article as: Carrascosa JM, de la Cueva P, Ara M, Puig L, Bordas X, Carretero G, et al. Metotrexato en psoriasis moderada-grave: revisión de la literatura y recomendaciones de experto. Actas Dermosifiliogr. 2016;107:194–206.

* Corresponding author.

E-mail address: jmcarrascosac@hotmail.com (J.M. Carrascosa).

is 10 to 20 mg/wk, the therapeutic dose for most patients is 15 mg/wk, and the maximum dose is 20 mg/wk. Most patients who respond to treatment will show improvement within 8 weeks. Parenteral administration of MTX is desirable when there is a risk of erroneous dosing, non-adherence, gastrointestinal intolerance, or inadequate response to the therapeutic dose taken orally. Noninvasive methods are preferred for monitoring hepatotoxicity. MTX is a good treatment option for patients with a history of cancer, but is not recommended in patients with chronic hepatitis B infection or individuals who are seropositive for human immunodeficiency virus.

© 2016 Published by Elsevier España, S.L.U. on behalf of AEDV.

PALABRAS CLAVE

Conferencia de consenso;
Metotrexato;
Psoriasis

Metotrexato en psoriasis moderada-grave: revisión de la literatura y recomendaciones de experto

Resumen Metotrexato (MTX) es el fármaco sistémico convencional más empleado en el tratamiento de la psoriasis. A pesar de que la experiencia en su uso se remonta a más de 50 años, todavía existen aspectos en el manejo clínico poco estandarizados o conocidos. Bajo esta premisa, un grupo de 15 expertos participó en una conferencia de consenso en la que, a partir de una revisión sistemática y 2 rondas de validación previas, se validaron recomendaciones categorizadas por nivel de evidencia y grado de recomendación sobre el uso de MTX en la psoriasis.

La elección de MTX en el tratamiento de la psoriasis moderada grave requiere la evaluación previa de la idoneidad del fármaco, incluyendo estado de vacunación, cribado de tuberculosis y gestación. La dosis recomendada de inicio es de 10–20 mg/semana si el paciente no presenta factores de riesgo, con una dosis terapéutica de 15 mg/semana para la mayoría de pacientes y máxima de 20 mg/semana. La mayor parte de pacientes que respondan al tratamiento mostrarán mejoría antes de las 8 semanas. Es preferible la administración parenteral de MTX cuando exista riesgo de error en la pauta de administración, incumplimiento, intolerancia gastrointestinal o respuesta insuficiente a dosis plenas por vía oral. Los métodos no invasivos son preferibles para la monitorización de la hepatotoxicidad. El tratamiento con MTX representa una buena opción en pacientes con antecedentes oncológicos, mientras que no se recomienda en pacientes portadores crónicos de virus de la hepatitis B o seropositivos para el virus de la inmunodeficiencia humana (VIH+).

© 2016 Publicado por Elsevier España, S.L.U. en nombre de AEDV.

Introduction

Methotrexate (MTX) is the most frequently used conventional systemic drug in the treatment of psoriasis, for which—in moderate to severe cases—it is still considered a first-line treatment, both in monotherapy and in combination with other drugs. The evidence supporting the use of MTX in moderate to severe psoriasis is based on retrospective studies and more than 50 years of clinical experience rather than on the results of clinical trials or controlled prospective studies.^{1,2} Although a good level of evidence can be found in some prospective studies that compare MTX with other drugs used in the systemic treatment of psoriasis, including ciclosporin and biologic agents such as adalimumab and infliximab,^{3–6} the variability in its use in terms of dose and dose escalation makes it difficult to reach any consensus on MTX in routine clinical practice. While the recent literature includes rigorous systematic reviews and expert consensus documents that have contributed recommendations on some aspects of the use of MTX in psoriasis, other topics have not been covered.^{7,8}

The objective of this consensus conference was to produce a set of recommendations on various aspects of the use of MTX in the treatment of moderate to severe psoriasis based on the available evidence and experience in routine clinical practice.

Consensus Methodology

A working group was formed comprising 15 dermatologists with particular expertise in psoriasis—all members of the Psoriasis Group of the Spanish Academy of Dermatology and Venereology (AEDV). The participants were all experienced in the management of MTX therapy in patients with psoriasis and authors of publications on the subject. Three members of the group acted as coordinators and the other 12 formed a panel of expert discussants whose task was to rate the validity of the proposals put forward by the coordinators. The coordinators drew up and agreed on a list of topics (Table 1) to ensure that all the questions regarding the clinical management of MTX in psoriasis considered of interest would be included. The questions were developed using the PICO methodology (patient, intervention, comparison, outcome).

Download English Version:

<https://daneshyari.com/en/article/3182175>

Download Persian Version:

<https://daneshyari.com/article/3182175>

[Daneshyari.com](https://daneshyari.com)