

EVALUATION OF METHOTREXATE PRESCRIPTIONS IN PRIMARY CARE: IDENTIFICATION OF PATIENTS WITHOUT FOLIC ACID SUPPLEMENTATION

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BACKGROUND AND IMPORTANCE

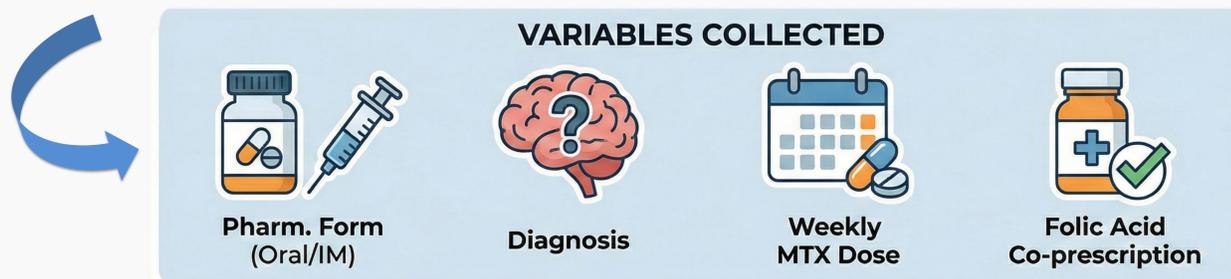
- Methotrexate (MTX) is widely used in **autoimmune and inflammatory diseases**.
- **Folic acid supplementation is recommended** to reduce adverse effects: Hepatotoxicity, gastrointestinal toxicity and cytopenias
- Despite this, **omission of folic acid remains a frequent prescribing error**.
- Early identification is essential to **prevent avoidable harm** and enable **pharmaceutical interventions**.

AIM AND OBJECTIVES

- 🎯 To identify primary care patients **receiving MTX without folic acid supplementation**.
- 🎯 To **describe treatment characteristics**: dose, route of administration, underlying diagnosis

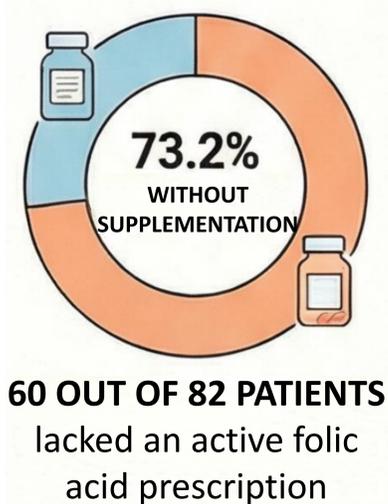
MATERIALS AND METHODS

Retrospective descriptive study of primary care patients with active MTX prescription (August 2025)



RESULTS

N = 82 patients

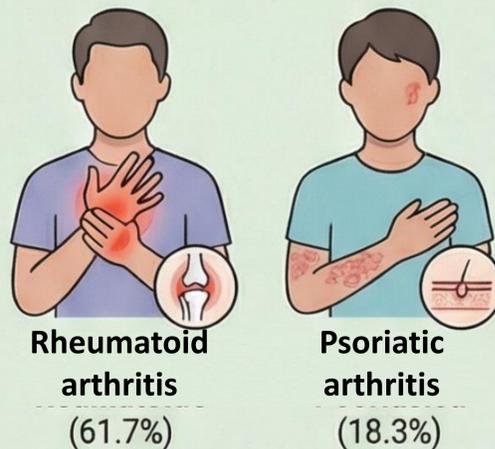


OMISSION IN HIGH DOSES

63.3%

Thirty patients received high-dose MTX (≥ 15 mg/week) of whom (63.3%) **did not have folic acid prescribed**

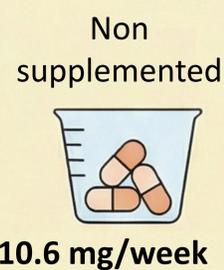
PATIENT PROFILE AND DIAGNOSES



ROUTE OF ADMINISTRATION



MEAN WEEKLY DOSE



CONCLUSION AND RELEVANCE

- ✓ A **high proportion of patients (73.2%)** lacked folic acid supplementation, including those on high-dose MTX.
- ✓ This represents a **frequent and preventable prescribing error**.
- ✓ Highlights the need for **systematic review of MTX prescriptions** and an **active involvement of hospital pharmacy services**
- ✓ Pharmacist-led interventions can **improve safety and reduce avoidable toxicity**.

