Methotrexate in high doses, followed by leucovorin rescue, is considered one of the treatments of patients with leukemia, including all childhood leukemia and adult acute and chronic leukemia. Methotrexate is also used in the treatment of children with retinoblastoma and other tumors that are sensitive to the effects of alkylating agents.

Methotrexate should be used only by physicians who have knowledge and experience in the use of this agent. Methotrexate is not recommended for use in children under the age of 6 months. Methotrexate is not recommended for use in the treatment of children with neuroblastoma or other tumors that are sensitive to the effects of alkylating agents.

The mechanism of action of methotrexate in leukemia is not entirely clear. However, it is thought that methotrexate interferes with the metabolism of folate, an essential nutrient for the synthesis of nucleic acids. Methotrexate is a competitive inhibitor of dihydrofolate reductase, an enzyme that catalyzes the conversion of dihydrofolate to tetrahydrofolate, which is required for the synthesis of thymidylate, a component of DNA.

Methotrexate is used alone or in combination with other agents in the treatment of various types of leukemia, including acute myelogenous leukemia, acute lymphoblastic leukemia, chronic myelogenous leukemia, and chronic lymphocytic leukemia. Methotrexate is also used in the treatment of children with retinoblastoma and other tumors that are sensitive to the effects of alkylating agents.

Sensitivities and tolerances to methotrexate may be expected to be drug-dependent. However, it is not known whether the drug is capable of causing serious adverse reactions.

Methotrexate is a potent and highly toxic drug that can cause severe and lifethreatening toxicity. It is important to monitor the patient closely for signs of toxicity and to adjust the dose accordingly. Methotrexate is used alone or in combination with other agents in the treatment of various types of leukemia, including acute myelogenous leukemia, acute lymphoblastic leukemia, chronic myelogenous leukemia, and chronic lymphocytic leukemia. Methotrexate is also used in the treatment of children with retinoblastoma and other tumors that are sensitive to the effects of alkylating agents.

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methylotrexate therapy. When the drug should be appropriately adjusted, reduced, or discontinued. Facial involvement of the skin by high-dose methotrexate may also result in interstitial pulmonary disease and the drug should be withheld immediately.

In the treatment of solid tumors, leukocyte counts or platelet levels may be decreased to less than 3,000/mcL or 50,000/mcL, respectively, for a period of time. Toxicity due to bone marrow suppression may occur in the stipulated doses daily.

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