

PERSPECTIVES OF METHOTREXATE USE IN TREATMENT OF PULMONARY SARCOIDOSIS PATIENTS

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Abstract

Currently systemic glucocorticosteroids (GCS) remain the major medication in management of sarcoidosis. In cases of GCS resistance, contraindications or serious adverse reactions the second-line drugs are indicated, represented mainly by methotrexate, azathioprine and leflunomid.

The *aim* was to compare the efficacy of methotrexate in patients with GCS contraindications and in GCS-resistant patients.

Materials and methods. Patients with pulmonary stage II sarcoidosis (12 with GCS contraindications and 8 with GCS-resistance) were enrolled. Methotrexate was administered 10 mg once a week in combination with folic acid 5 mg once a week.

Results. In patients with contraindications and GCS serious adverse reactions methotrexate helped to achieve regression in 10 out of 12 cases.

In GCS-resistant sarcoidosis patients methotrexate monotherapy was mostly ineffective (7 out of 8 cases). This finding suggests further evaluation of methotrexate use in combination with other first line drugs.

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