

Taking Control of your IBD with Medications

There is no one-size-fits-all approach to treatment for the two main forms of inflammatory bowel disease (IBD), Crohn's disease and ulcerative colitis. Understanding your treatment options can help you manage your IBD and have conversations with your healthcare provider to find what works best for you.

Goals of Therapy in IBD

Medications used to treat inflammation in the gut in Crohn's or colitis usually suppress the immune system. This is because the immune system's response is abnormal in IBD, causing inflammation and damage to the gut. Most medications used in IBD aim to control the abnormal immune system response.

The goals of therapy in IBD are to make you feel better, reduce or relieve symptoms, minimize any potential side effects from medications, control inflammation in the gut, and ultimately, heal the mucosa of the gut (i.e., the inner lining of the gastrointestinal tract).

Your healthcare providers will recommend tests to monitor your level of inflammation even when you are feeling well. This could include blood tests, stool tests, and colonoscopy.

Sulfasalazine and 5-Aminosalicylates (5-ASA)

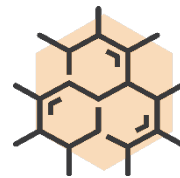
Sulfasalazine is a drug that is made up of two components: sulfapyridine and 5-aminosalicylic acid (5-ASA). 5-ASA medications are used to treat adults with mild to moderate colitis. Examples of these drugs include mesalamine (Salofalk[®], Mezavant[®], Pentasa[®]) and sulfasalazine (Salazopyrin[®]). They are available as oral pills, suppositories, rectal foams, and liquid enemas. Most people with IBD tolerate 5-ASA medications well. Potential side effects of 5-ASAs can include rare worsening of diarrhea, rashes, nausea, headaches, reduced appetite, and hair loss.





Immunomodulators

Immunomodulators, also known as immunosuppressants, are used to treat adults with moderate to severe Crohn's and colitis. Examples of immunomodulators include methotrexate (Rheumatrex[®]), azathioprine (Imuran[®]), and 6-mercaptopurine (Purinethol[®]). These are available as oral pills, subcutaneous and intramuscular injections. Side effects of immunomodulators can include allergic reactions, acute pancreatitis, hepatitis, bone marrow suppression, and increased risk of infection and malignancy (including some medications with an increased risk of blood cancer called lymphoma). It is important to get monitoring bloodwork done while on immunomodulators.



Steroids

Steroids are used to treat children and adults with mild to severe Crohn's and colitis. Healthcare providers prescribe these medications for short periods of time, typically less than three months, to reduce the potential for long-term risks or side effects. However, your prescription could be extended for longer periods, depending on your personal situation. Examples of corticosteroids include prednisone (Winpred[®]) and budesonide (Entocort[®], Cortiment[®]). These medications can be taken orally, intravenously, or in the form of rectal enemas, suppositories and foams. Steroids may have significant short-term side effects including fluid retention, weight gain, psychological distress, and muscle or bone weakness.



Biotherapies

Biotherapies (biologic and biosimilar medications) are used to treat children and adults with moderate to severe Crohn's and colitis. Examples of biologic medications include infliximab (Remicade[®]), adalimumab (Humira[®]), golimumab (Simponi[®]), vedolizumab (Entyvio[®]), ustekinumab (Stelara[®]) and risankizumab (Skyrizi[®]).

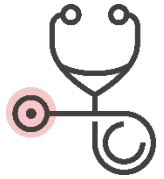
Biosimilars are manufactured to match biologic medications as closely as possible and to be safe and effective. Examples of biosimilars include Inflectra[®] and Renflexis[®] (originator biologic Remicade[®]) and Amgevita[™] and Hadlima[™] (originator biologic Humira[®]).

The methods of biotherapies administration are intravenous infusions or subcutaneous injections. Side effects and risks of using biotherapies vary depending on the type of biologic and may include injection/infusion site reactions, allergic reactions, and infection.

Please visit crohnsandcolitis.ca/biotherapies for an up-to-date list of biotherapies available in Canada.

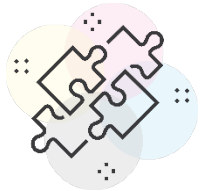
JAK Inhibitors

Janus Kinase (JAK) inhibitors are used to treat adults with moderate to severe colitis. Examples of JAK inhibitors are tofacitinib (Xeljanz[®]) and upadacitinib (Rinvoq[®]). These are available as oral tablets. Side effects of JAK inhibitors can include increased risk of blood clots and infections (particularly shingles) and higher blood cholesterol. If you are starting a JAK inhibitor, it is important to ask your healthcare provider about getting vaccinated against shingles.



S1P Receptor Modulators

An example of an S1P receptor modulator is ozanimod (Zeposia[®]) and it is used to treat adults with moderate to severe colitis. Zeposia[®] is available as oral capsules. Side effects can include higher levels of the liver enzyme, infection, and headaches. Certain people with pre-existing heart conditions should not use Zeposia[®]. If you have a history of diabetes, you may require an eye examination prior to treatment with Zeposia[®].



Antibiotics

Antibiotics alone are not prescribed to treat Crohn's and colitis. Instead, they are used in combination with other IBD medications to treat the **complications** of these diseases, e.g., abscesses, perianal fistulas, and pouchitis.

Examples of antibiotics used in IBD include metronidazole (Flagyl[®]) and ciprofloxacin (Cipro[®]). These are available as oral medications and injections. Side effects of antibiotics can include nausea, vomiting, diarrhea, developing *Clostridium difficile* (*C.diff*) infection and yeast infection in women.

Disclaimer

Do not stop taking any medications without consulting your healthcare provider. Abruptly stopping a medication could lead to a flare-up or period of active disease, and it may be difficult to restart the medication without needing surgery or steroids. Talk to your healthcare provider if you have concerns about medication use or side effects.

This material from Crohn's and Colitis Canada was created in collaboration with clinical and research experts in the field of inflammatory bowel disease. The material is for educational purposes only. It is of general value and may not apply to specific medical situations. Educational resources are not a substitute for the personalized judgment and care of a trained healthcare professional.

Crohn's and Colitis Canada

Improving the lives of people affected by Crohn's disease and ulcerative colitis – at all stages of life, from every corner of the country – is why Crohn's and Colitis Canada is on a relentless journey to find a cure for these lifelong diseases, and improve the quality of life of everyone in Canada affected by them.

Join us to deliver even more impact by visiting crohnsandcolitis.ca to support our efforts, volunteering to make a difference, and lending your voice to make governments aware of the needs of people with Crohn's and colitis.

Please visit crohnsandcolitis.ca/medications for an updated list of IBD medications and to learn more about other treatment options available in Canada.

