INFLAMMATORY BOWEL DISEASE (IBD): CROHN’S DISEASE

Treatment: Nutrition and Medication

While there is no cure for Crohn’s disease, there are a number of options to help treat it. The goals of treatment are to:

- Control inflammation, or swelling.
- Ease symptoms, like pain, diarrhea (loose stool) and bleeding.
- Fix nutrition deficiencies, if needed.

Treatment will depend on where the disease is and the severity of the disease, past complications, and response to earlier treatments. Remember, everyone experiences symptoms of Crohn’s disease differently. If one treatment doesn’t work as well, there are other options. Just be sure to be in touch with your doctor regularly.

Treatment options for Crohn’s disease involve medications, nutrition supplementation, surgery or a combination.

Medications

The goals of using medications are to start or keep up remission (no symptoms) and to improve quality of life. Each person reacts a little bit differently to each drug and many need a combination of drugs. While some of them have side effects, the benefits and symptom relief often outweigh those drawbacks.
Aminosalicylates

- Help control inflammation, especially in those who are newly diagnosed with mild symptoms.
- Sometimes these drugs are called 5-ASA’s, which stands for 5-aminosalicylic acid.
- **Examples include:**
  - Balsalazide.
  - Mesalamine.
  - Olsalazine.
  - Sulfasalazine.
- **Possible side effects include:**
  - Belly pain.
  - Diarrhea (loose stool).
  - Headaches.
  - Heartburn.
  - Nausea and throwing up.

Corticosteroids

- These drugs can be very helpful right away. They help lessen inflammation quickly.
- These are often given in large doses when the disease is at its worst, then lowered as symptoms get under control. They are given to people with moderate to severe symptoms.
- These drugs are not given for long-term use.
- **Examples include:**
  - Prednisone.
  - Budesonide.
  - Hydrocortisone.
  - Methylprednisolone.
- **Possible side effects include:**
  - Weight gain.
  - Acne.
  - Facial hair.
  - Mood swings.
- Bone mass loss.
- Greater risk of infection.
- Hypertension.
- High blood sugar (diabetes).

- Stopping these drugs suddenly could cause withdrawal symptoms, so your doctor will have you lower the dose slowly.

**Immunomodulators**

- Immunomodulators, or immunosuppressive agents, block the immune reaction that leads to inflammation, lessening inflammation in the gastrointestinal (GI) tract.
- These drugs can take up to three months to start working, so they are often used with other medicines until that time.
- These are given to help people go into remission or given to people who have not responded to other treatments.
- **Examples include:**
  - 6-mercaptopurine (6-MP).
  - Methotrexate.
  - Azathioprine.
- **Possible side effects include:**
  - Nausea or throwing up.
  - Diarrhea (loose stool).
  - Less able to fight infections (from low white blood cell count).
  - Fatigue or feeling tired.
  - Pancreatitis.
Biologic Treatments

- These drugs can lessen inflammation and quickly bring on remission of Crohn’s disease.
- These drugs are used in people with moderate to severe Crohn’s disease who do not respond to other treatments.
- These drugs are often given by either injection or infusion every two to eight weeks, based on what the patient needs.
- These drugs tend to cost more, so talk to your health plan before starting.
- Examples include (brand names may be different):
  - Infliximab.
  - Adalimumab.
  - Certolizumab.
  - Vedolizumab.
  - Natalizumab.
  - Ustekinumab.
- Possible side effects include:
  - Allergic reaction.
  - Itching or bruising at injection or infusion site.
  - Greater chance of getting infections (especially tuberculosis).*
  - Greater chance of lymphoma.*

*Less chance of infection or lymphoma with Vedolizumab.

Biosimilar Treatments

- There is a new type of biologic treatment, known as biosimilar products.
- Biosimilars have been approved by the U.S. Food and Drug Administration (FDA) to use as treatment in place of existing biologic drugs.
- They are highly similar to originator biologic drugs and have no clinically meaningful differences, though they are not generic drugs.
- Your doctor can prescribe a biosimilar as a substitute for a biologic drug; however, your pharmacist cannot change you from a biologic drug to a biosimilar without your doctor’s approval.
• Overall, biosimilar products should produce the same effects as a standard biologic drug. Talk to your doctor about more information and what is best for you to treat your Crohn's disease.
• **Examples include:**
  – Infliximab-dyyb (Inflectra).
• **Possible side effects include:**
  – Same as biologic drugs.

Other Medications

• Acetaminophen can be used for mild pain.
  – People with Crohn's disease should not take ibuprofen, aspirin or naproxen as they can make symptoms worse or cause GI bleeding.
• Antibiotics are given to prevent or treat infections and fistulas (a link between two body parts that should not be there, such as between two organs; they can form from infection, inflammation or surgery).
• Loperamide is given to help slow or stop severe diarrhea. It should only be taken for short cycles of time.

For more information on drug options, check out the patient companion to the AGA Clinical Guidelines on the use of drugs in patients with Crohn’s disease.
Nutrition Supplementation

While no foods cause Crohn’s disease, good nutrition is still very important and certain changes in diet could help lessen symptoms. Different foods can trigger symptoms for different patients, so it’s best to learn what works for you. Speak to your doctor or a registered dietitian (RD) about what nutrition steps would be best for you.

Some nutrition options for people with Crohn’s disease are:

- Staying away from carbonated drinks.
- Avoiding popcorn, raw veggies, nuts and other high-fiber foods.
- Drinking more liquids (not alcohol). Oral rehydration solution (such as Pedialyte®) is good.
- Eating smaller meals more often.
- Keeping a food journal to track symptoms.
- Using a nutrition supplement or vitamin.

There are times when symptoms are so bad that any food can cause harm. If this happens, your doctor may suggest **bowel rest**. Bowel rest means either only consuming clear liquids/defined supplements (no solid food) or not consuming anything by mouth at all. If your doctor puts you on bowel rest, you will get nutrition through an IV. Some people stay in the hospital during bowel rest, but others get the treatment at home. During this time, the intestines are able to heal.