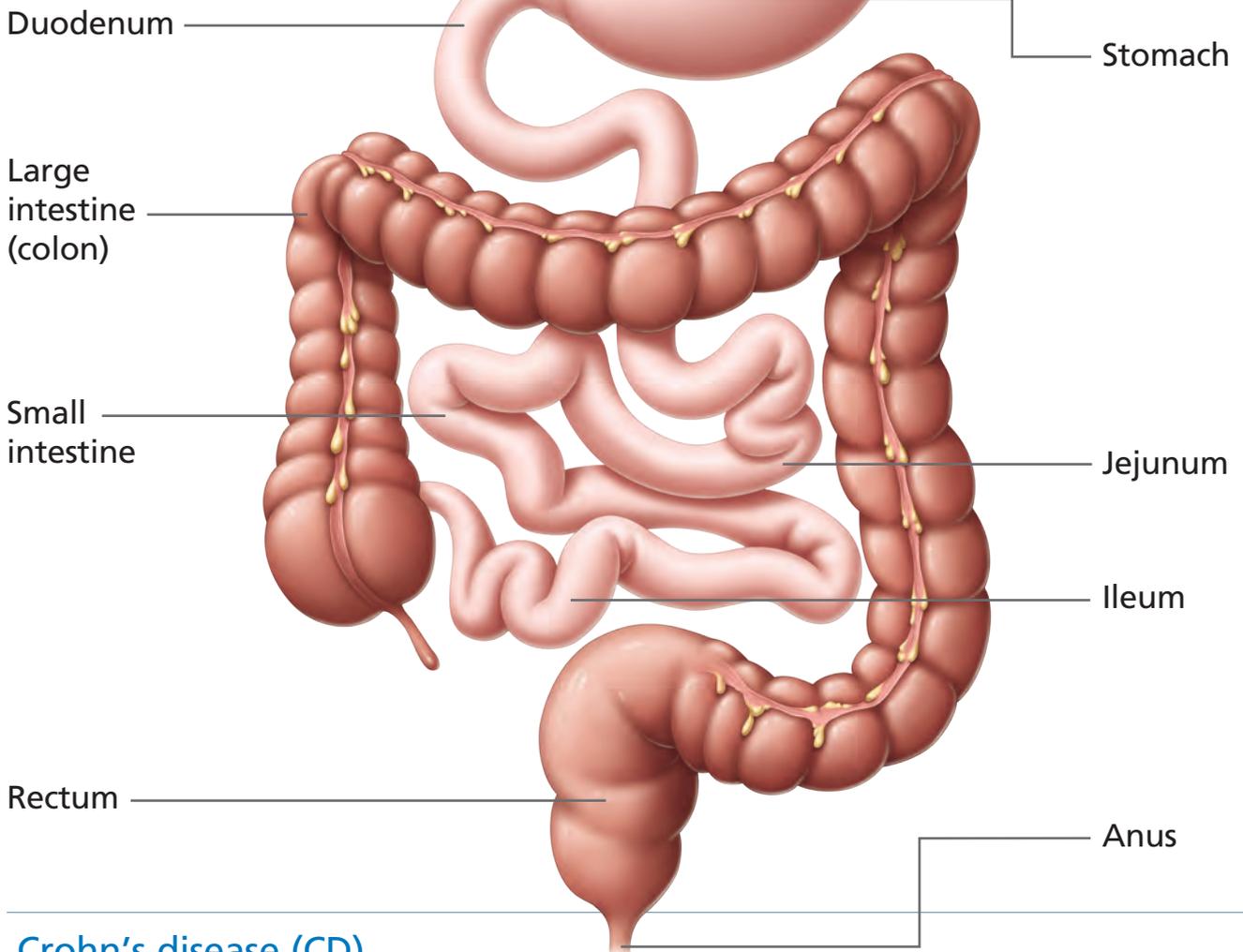


Understanding Crohn's Disease



Crohn's disease (CD)

A chronic illness that causes inflammation in the lining of the digestive system¹

Symptoms¹

- Diarrhea
- Abdominal pain/cramping
- Bloody bowel movements
- Ulcers
- Reduced appetite
- Weight loss
- Fever
- Fatigue

Complications¹

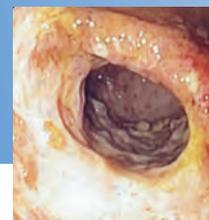
Potential complications arising from CD include:

- **Bowel obstruction:** CD tends to thicken the intestinal wall with swelling and scar tissue that may block the passage of digestive contents
- **Ulcers:** Chronic inflammation can lead to open sores (ulcers) anywhere in the digestive tract
- **Fistulas:** Passages caused by ulcers that tunnel from the affected intestine into surrounding tissues such as the bladder, vagina, skin or other parts of the intestine
- **Anal fissure:** A crack or cleft in the anus or in the skin around the anus where infections can occur

Understanding Crohn's Disease



Healthy intestine



Intestine with CD

Treatment goals²

- Achieve relief of symptoms and remain symptom-free
- Improve quality of life
- Minimize short- and long-term toxicity and complications
- Achieve and maintain mucosal healing

Treatment options

Treatment of CD is tailored to each patient depending on the location, severity and complications outside the intestines. Here are some common treatment options available^{2,3†}:

Treatment options	Description
Aminosalicylates e.g., 5-ASA: Asacol [*] , Pentasa [*] , Salofalk [*] , Mezavant [*]	Orally and rectally administered anti-inflammatory drugs for mild to moderate disease; they act through several mechanisms
Antibiotics e.g., ampicillin, tetracycline, metronidazole, ciprofloxacin	Oral drugs that help reduce harmful intestinal bacteria
Corticosteroids e.g., prednisone, methylprednisone, budesonide	Orally and rectally administered drugs used to suppress the inflammatory response through a variety of mechanisms
Immunosuppressants e.g., Imuran [*] (azathioprine), Purinethol [*] (6-mercaptopurine), methotrexate	Oral medications that inhibit the immune system
Biologics e.g., Remicade [*] (infliximab), Humira [*] (adalimumab)	Intravenous and injectable agents that block the action of tumour necrosis factor (TNF), a mediator of inflammation
Surgery e.g., colectomy	Removal of the damaged portion of the intestinal tract to treat medically refractory disease or complications

† These treatment options do not necessarily treat or prevent complications of CD.

Notes:

References: **1.** Crohn's Disease. Mayo Clinic website. <http://www.mayoclinic.com/health/crohns-disease/DS00104>. Accessed November 9, 2010. **2.** Lichtenstein MD, Hanauer SB, Sandborn W, and The Practice Parameters Committee of the American College of Gastroenterology. Management of Crohn's disease in adults. *Am J Gastroenterol.* 2009;104:465-483. **3.** Sadowski DC, Bernstein CN, Bitton A, Croitoru K, Fedorak RN, Griffiths A, and the CAG Crohn's Consensus Group. Canadian Association of Gastroenterology Clinical Practice Guidelines: The use of tumour necrosis factor-alpha antagonist therapy in Crohn's disease. *Can J Gastroenterol.* 2009;23:185-202.

* Trademarks are the property of their respective owner(s).