

# CROHN'S DISEASE

Understanding  
your condition



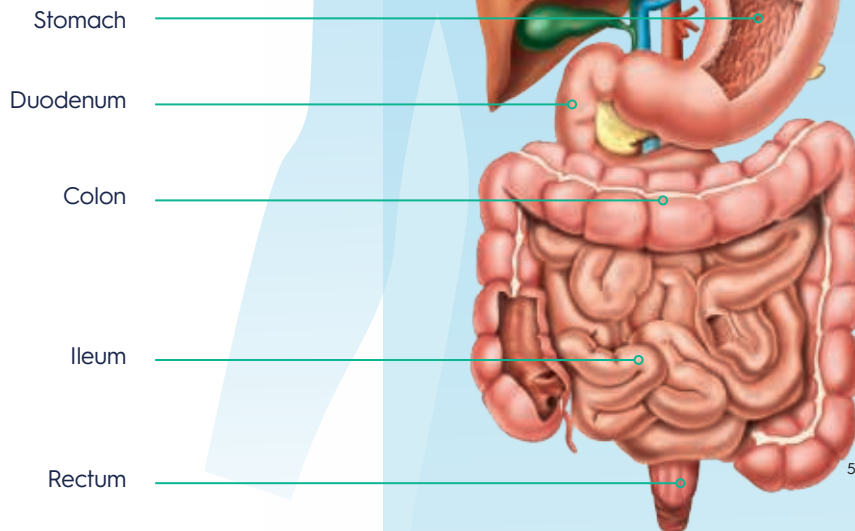
# What is Crohn's disease?

Crohn's disease (CD) is a **chronic inflammatory condition** that affects the **digestive tract**. It usually affects the last part of the small intestine (ileum) and the beginning of the colon but it can affect the entire digestive tract, from the mouth to the anus<sup>1,2</sup>.

20-30



The disease can occur at any age, but it is most often diagnosed in adolescents and adults between the ages of 20 and 30<sup>2</sup>.



# What causes Crohn's disease?

The cause of Crohn's disease (CD) is unknown<sup>1</sup>.

## Genetics

Having family members with this condition increases the risk of developing CD<sup>1,2</sup>.

## Risk factors

When a person with this **inherited** risk is exposed to a **trigger** (something in the environment), the immune system is activated<sup>1</sup>.

The **immune system** recognises the lining of the digestive tract as foreign and attacks it, causing inflammation, which eventually leads to ulcers and symptoms of CD<sup>1,2</sup>.



Genetic susceptibility



Trigger

Activated immune system

Attacks the intestines



Crohn's disease

# What are the symptoms of Crohn's disease?

The most common symptoms of CD include<sup>1,2</sup>:



**Diarrhoea**



**Abdominal pain**



**Weight loss**



**Fever**



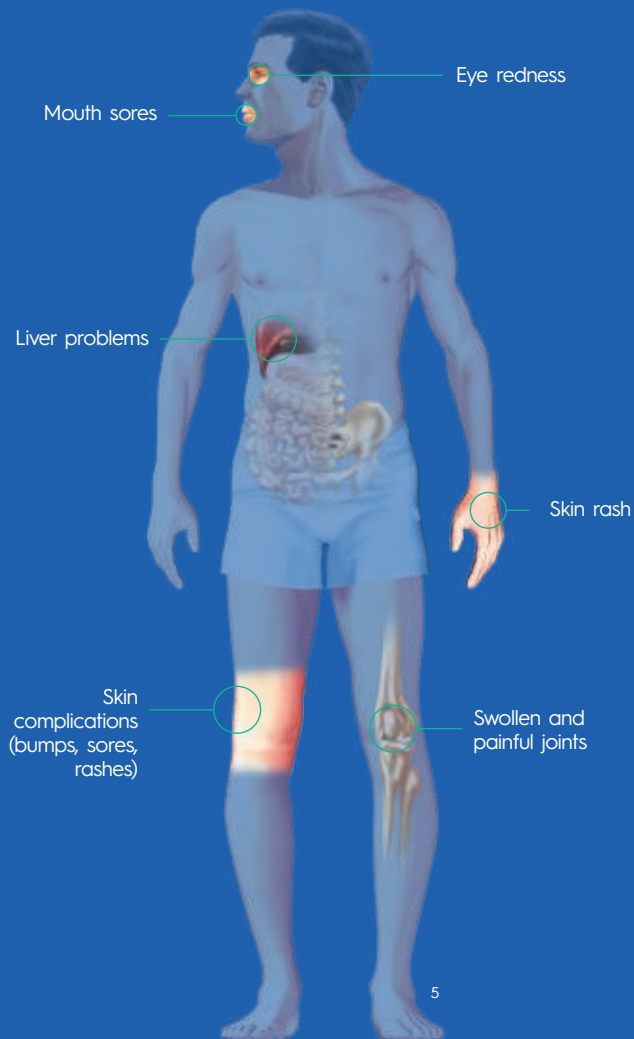
**Rectal bleeding**



**Fatigue**

Crohn's disease typically follows cycles of flares (when the condition worsens and symptoms are present) followed by periods of remission (when inflammation is controlled, and symptoms are absent)<sup>2</sup>.

Some people with CD also have problems outside of the digestive tract, including<sup>2</sup>:



# How will my doctor diagnose my disease?

A combination of tests are used to diagnose CD<sup>1,2,3</sup>.



## Blood tests

To check for anaemia.



## Stool studies

To test for routine pathogens.



## Colonoscopy

Allows to view the entire colon. During this procedure, small samples of tissue can be taken (biopsy) for laboratory analysis, which may help to make a diagnosis.



## Computerised tomography

Allows to detect fistula and CD-related stenosis.



## Magnetic resonance imaging

Useful for evaluating a fistula around the anal area.



## Capsule endoscopy

A swallowed capsule with a camera takes pictures of the small intestine.

# What are the treatment options?

Which medicine is used depends on several factors such as age, the part of the intestine affected, severity and the presence of other medical conditions<sup>3</sup>:

## ✓ **5-aminosalicylates and sulfasalazine:**

Used to reduce inflammation in the last part of the ileum and colon<sup>3</sup>

## ✓ **Immunomodulators:**

Might be recommended if you have severe symptoms or do not improve with steroids, or if your symptoms worsen after decreasing your steroid dose<sup>3</sup>



**Treatment is directed both toward improvement of symptoms and controlling the disease process<sup>3</sup>.**

In addition to controlling and suppressing symptoms, medication can also be used to decrease the frequency of symptom flares<sup>2</sup>.

## ✓ **Corticosteroids:**

Used for a limited time to reduce inflammation<sup>1</sup>

## ✓ **Biologics:**

Used to induce remission. These are often used in combination with treatments described above<sup>2,3</sup>



**If medicine does not control symptoms, surgery might be an option<sup>2</sup>**

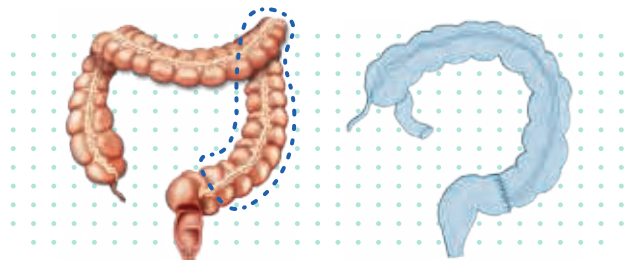


# Surgery and Crohn's disease

Even with proper medication and diet, as many of **two-thirds or three-quarters of people with CD will require surgery** at some point in their life<sup>2</sup>.



**Surgery for CD commonly include removal of part of the colon:** the surgeon removes the diseased part of the intestine (resection), then rejoins the two healthy ends (anastomosis)<sup>2</sup>.



**While these procedures may cause the disappearance of symptoms for many years, CD frequently recurs later in life<sup>2</sup>.**

# What can I do to manage my disease?

Some lifestyle recommendations to avoid worsening of the disease are<sup>3,4</sup>:

Temporarily avoid foods that might worsen your symptoms, such as dairy products



Eat small meals and drink plenty of liquids



Quit smoking



Practice regular relaxation to cope with stress



Avoid nonsteroidal antiinflammatory drugs (NSAIDs) such as ibuprofen and naproxen



# References

1. Roda, G. *et al.* Crohn's disease. *Nat. Rev. Dis. Primers*. <https://doi.org/10.1038/s41572-020-0156-2> (2020).
2. Crohn's & Colitis Foundation. Crohn's Disease. <https://www.crohnscolitisfoundation.org/what-is-crohns-disease/overview> (2021).
3. Crohn Disease. *Quick Medical Diagnosis & Treatment 2022* (eds. Papadakis, M.A., McPhee, S.J., & Bernstein, J.). New York: McGraw Hill. <https://accessmedicine.mhmedical.com/content.aspx?bookid=3109&sectionid=261297832> (2022).
4. Lichtenstein, G.R. *et al.* ACG Clinical guideline: management of Crohn's disease in adults. *Am. J. Gastroenterol.* **113**, 481-517. <https://doi.org/10.1038/ajg.2018.27> (2018).
5. Letter on behalf of EC Europe - 9 Feb 2022.





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