

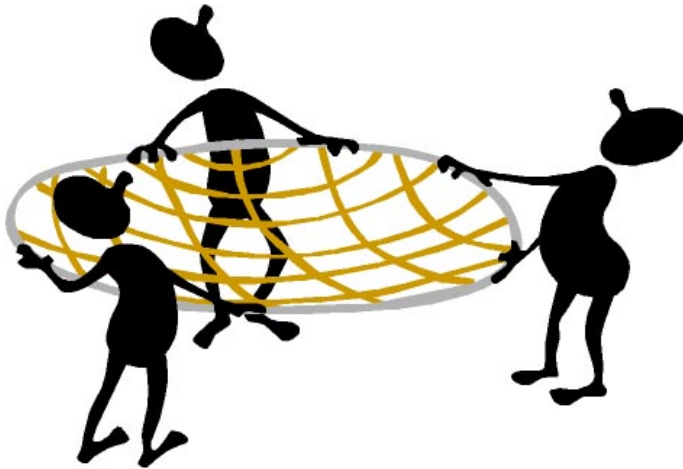
# Monitoring IBD Therapy

IBD Patient Education Day

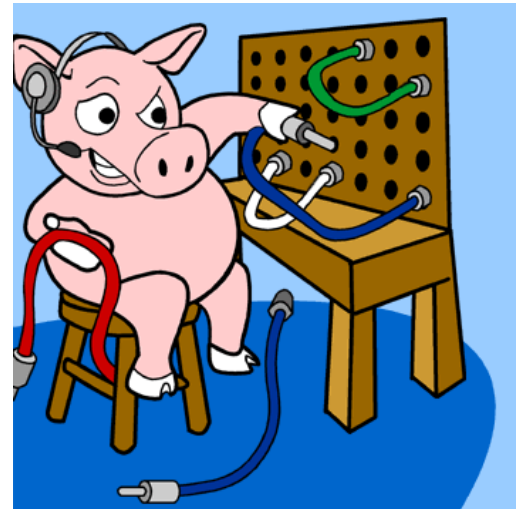
September 11, 2010

Kim L. Isaacs, MD

# Why do we monitor drug therapy in IBD?



To Keep You Safe



To make sure it has  
a good chance of  
working

# Steroids

**John F. Kennedy**



## History

- Age 13 abdominal pain
- Age 16 diagnosis of colitis at Mayo Clinic
- Treated with steroids
- Age 22 → back pain
- Age 26 1<sup>st</sup> back operation
- Age 23 → addison's ( adrenal gland supression from steroids)
- Compression fractures, osteoporosis (bone thinning)

# Spinal Compression Fracture



# What do we know about steroid side effects?



Bone loss



Cataracts



Acne



Mood disturbances

# What can we monitor?



Blood test – can be replaced if low



## Bone Density

With steroid exposure – monitor bone density every 1-2 years with DEXA scan

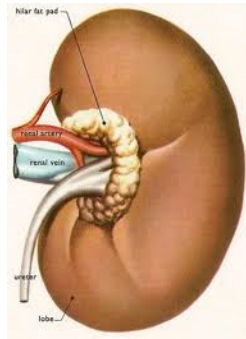
# What can we monitor?



# 5-Aminosalicylates

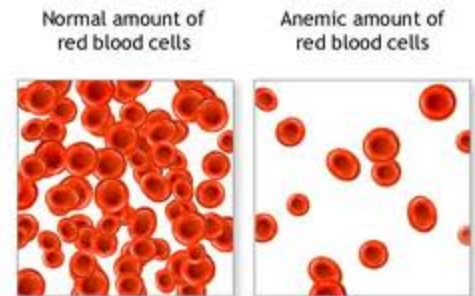
## What are these?

- Sulfasalazine
- Asacol
- Pentasa
- Colazal®
- Rowasa
- Canasa
- Lialda
- Apriso™



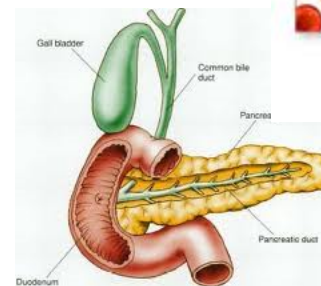
Abnormal kidney function

## Side Effects



ADAM

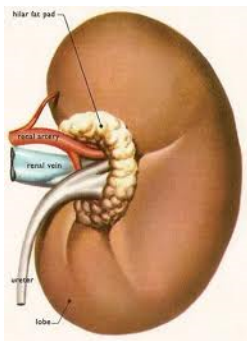
Anemia



Pancreatitis



# What can we monitor?



Creatinine –  
blood test –  
should be done  
annually

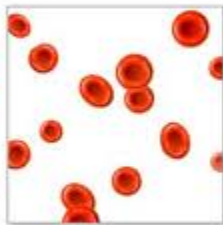


Loose kidney function  
→ dialysis

Normal amount of  
red blood cells



Anemic amount of  
red blood cells



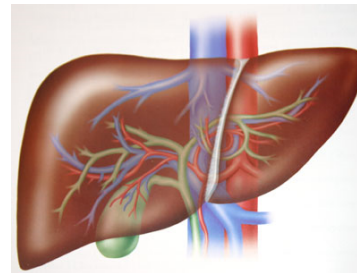
CBC – complete  
blood count

# Anti-metabolites

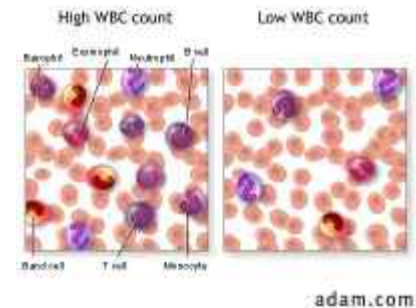
## What are these?

- Azathioprine
- 6 MP
- Purenithol
- Imuran
- Aza-san

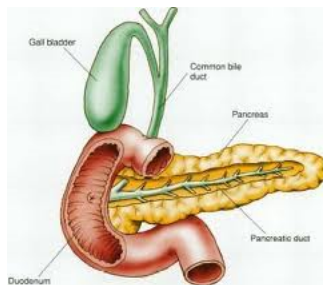
## Possible Side effects



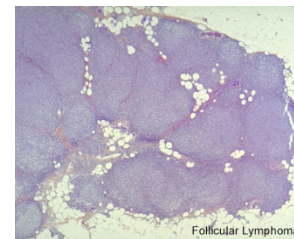
Liver inflammation



Low white  
blood cell  
count

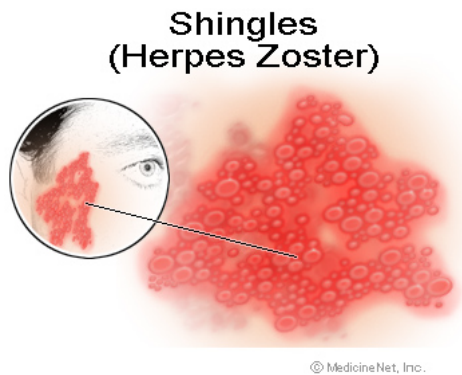


Pancreatitis →  
allergic reaction

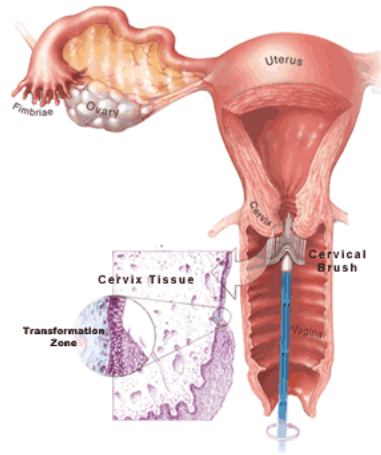


Rare: lymphoma

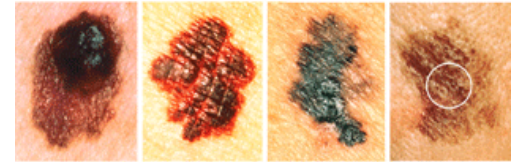
# Other side effects



Reactivation of Viruses



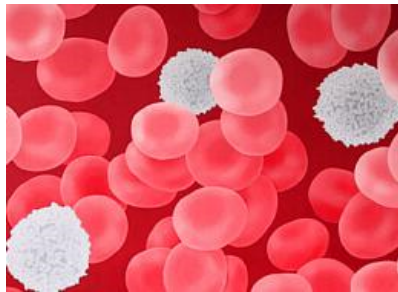
HPV virus and  
cervical cancer



Skin Cancer Prevention

Increased skin  
cancer risk

# What can we monitor?



CBC – complete blood count which will give us the total white blood cell count as well as look for anemia.



If white count is low – drug dose is decreased or stopped.

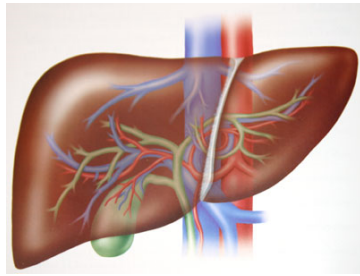


If drug treatment is not adjusted a continued low white count can lead to infection.



I am not exactly certain what it is yet until the tests come back but it looks like its some sort of fungal infection

# What can we monitor?



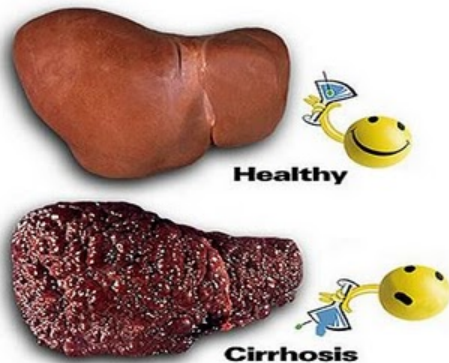
Blood Test to look at liver enzymes:  
This may include AST, ALT, Bilirubin,  
Alkaline Phosphatase



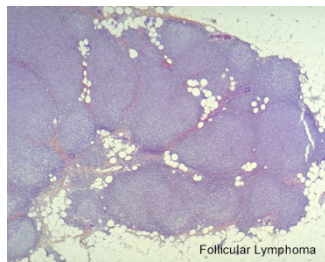
If enzymes are increased drug dose  
is either decreased or stopped.



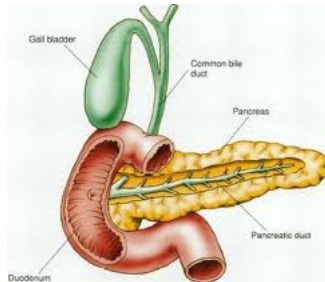
If drug treatment is not adjusted  
a continued liver damage can  
lead to scarring of the liver.



# What can we monitor?



Physical exam is monitored for development of abnormal lymph nodes.



Amylase and lipase are not routinely monitored but are checked if pain and vomiting start after starting the medication.

Pancreatitis

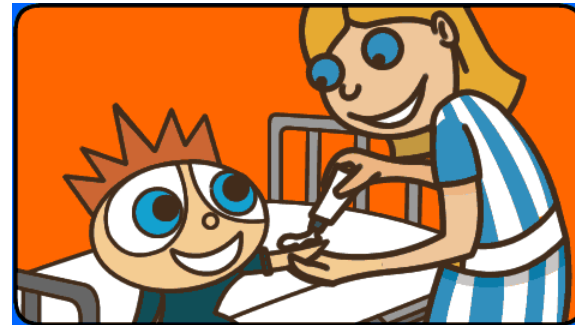
# What can we monitor?



Periodic skin checks especially in fair skinned people



Annual PAP Smears



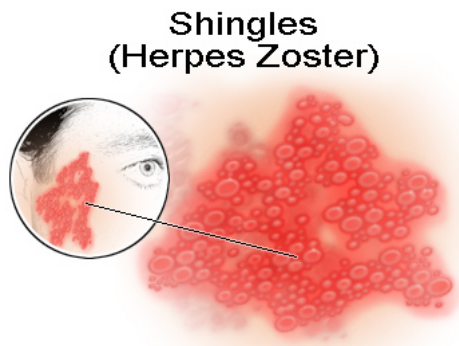
Can check immunity for a variety of viruses including hepatitis



# Anti-TNF Drugs

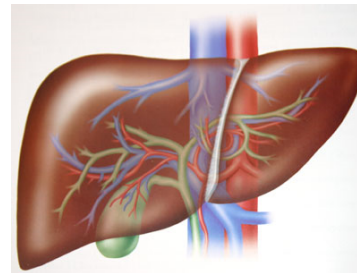
## What are they?

- Remicade
- Humira
- Cimzia

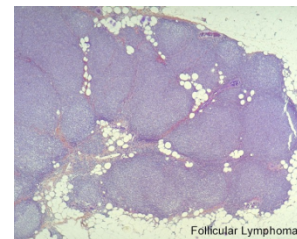


Reactivation of Viruses

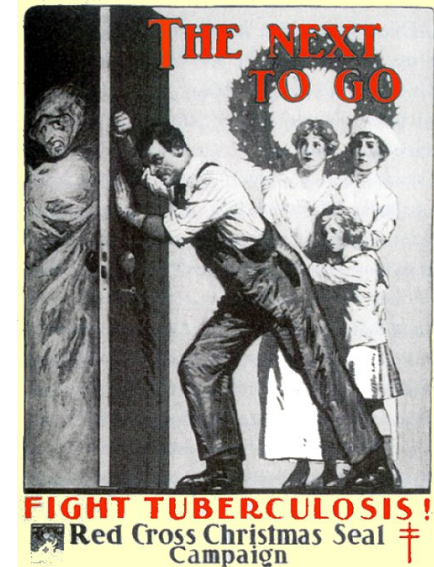
## Possible side effects



Liver inflammation



Rare: lymphoma



Reactivate TB



# What can be monitored?



TB skin test



Chest X-ray

# Can my medication work better?

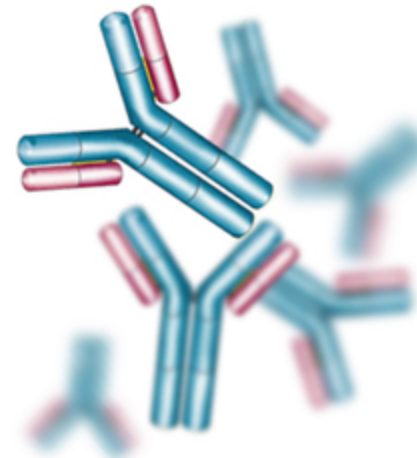
## 6 MP/AZA

- Metabolites

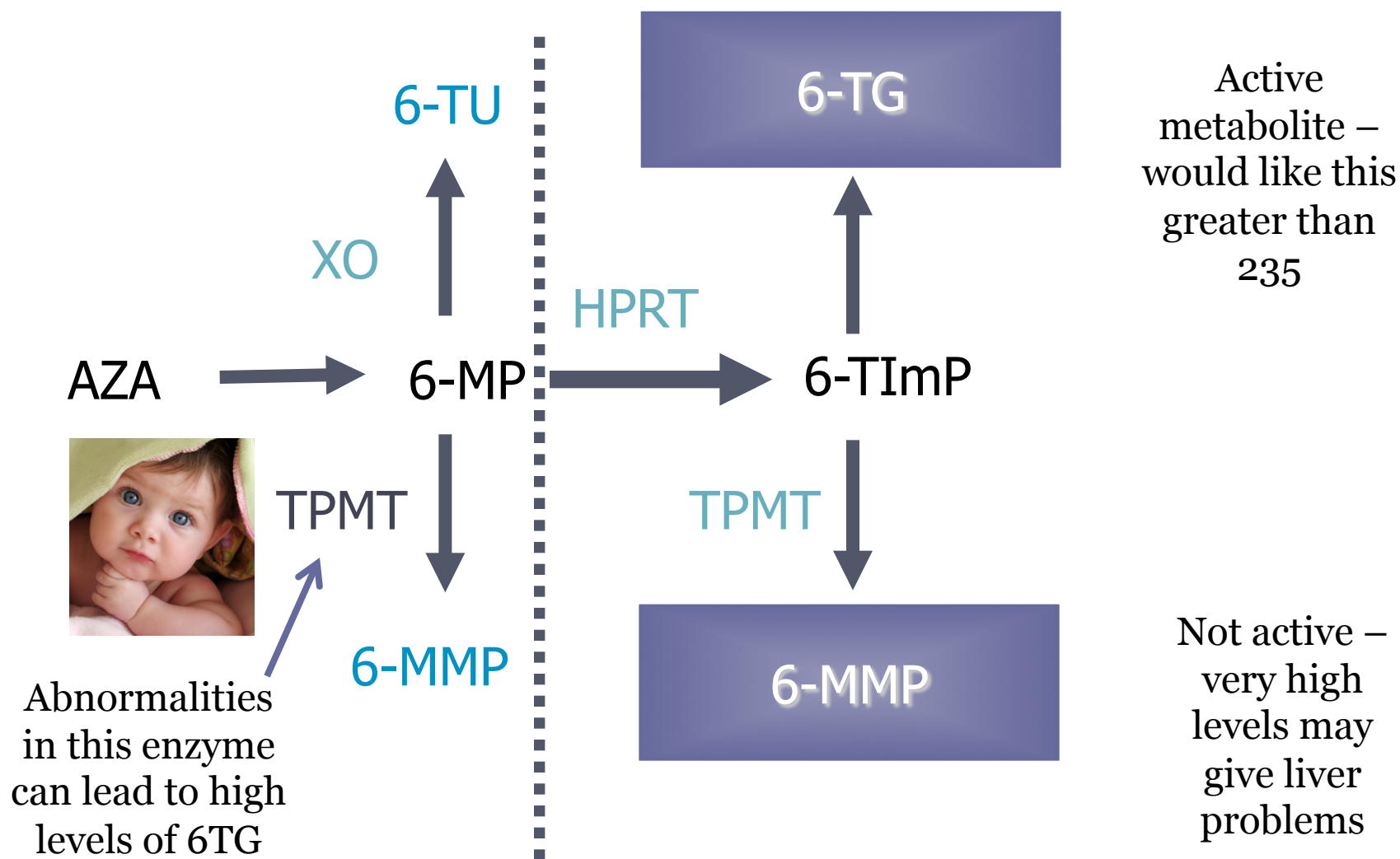


## Infliximab

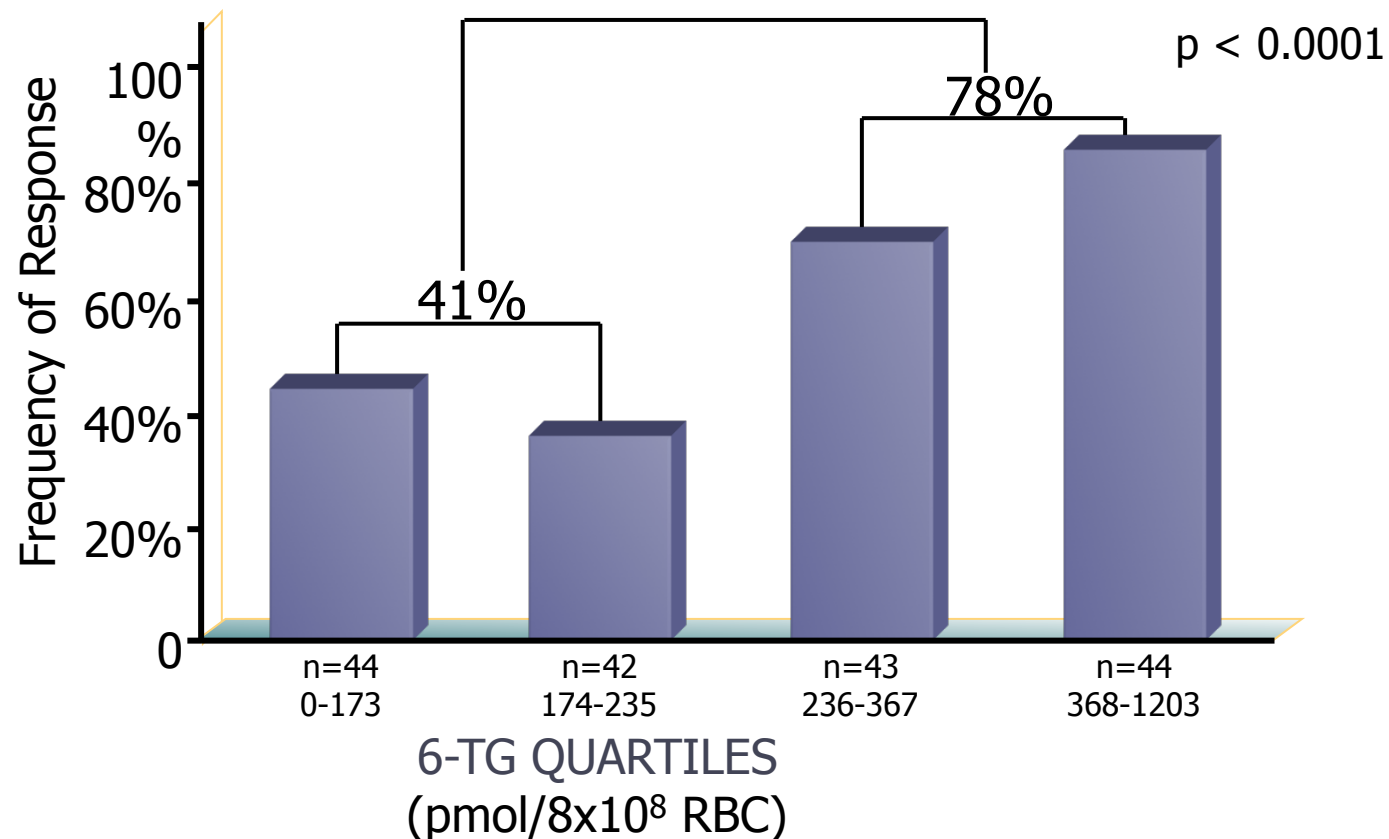
- Antibody levels
- Drug Levels



# 6MP Metabolites - Pro-predict



# 6-TG Level Correlates With Clinical Response

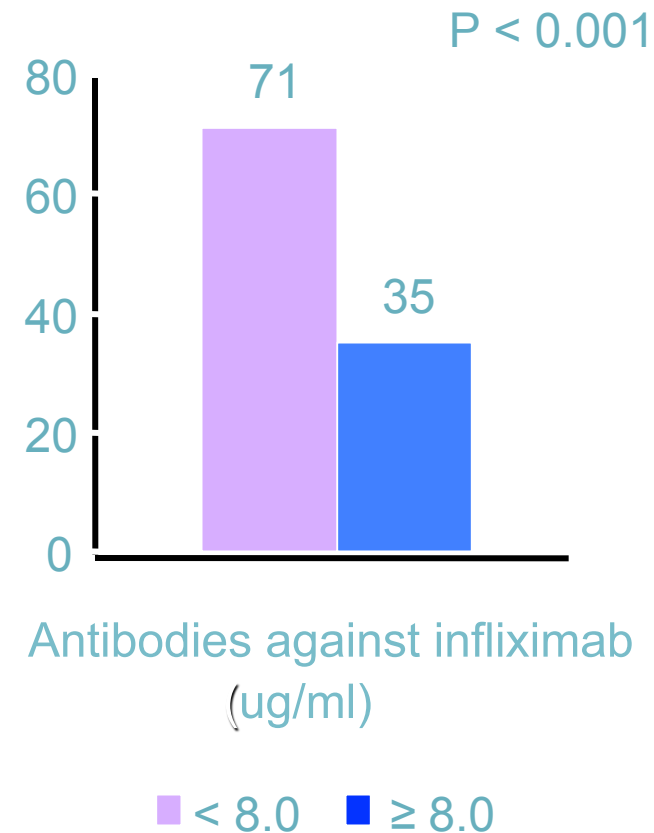


Dubinsky M. et al,  
*Gastroenterology* 2000;118:705-13

# Antibodies and how long Infliximab Works

- 125 consecutive patients with refractory CD
- Treatment with infliximab on demand, mean 3.9 infusions, range 1-17
- ATI in 61% of patients
- ATI concentrations  $\geq 8$  ug/L predicted greater risk of infusion reactions (RR 2.4)

Median duration of  
response (days)





The End

