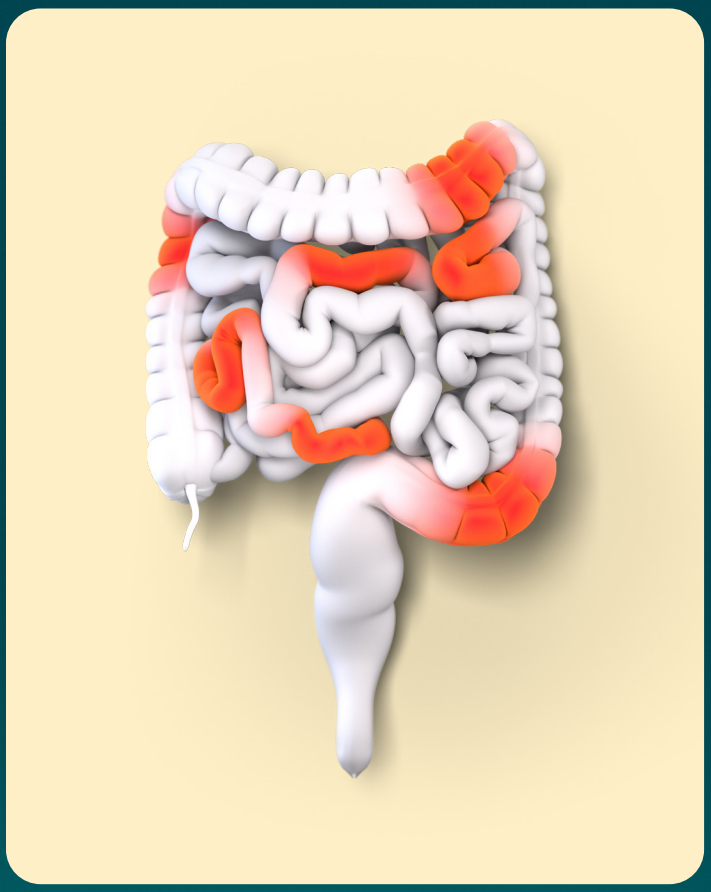
Management of Crohn's disease

LIVING WITH IBD

UNDERSTANDING THE JOURNEY



Living with IBD is a journey

Crohn's disease is a type of inflammatory bowel disease (IBD). Learning about Crohn's and ways to help manage it can be a good start for your journey. Pace yourself as you work with your care team to chart the best path forward.

Understanding inflammatory bowel disease (IBD)

IBD is a chronic, lifelong disorder that involves inflammation of the digestive tract

It can often be managed, but not cured. It is considered an autoimmune disorder because the body's own defense system mistakenly attacks healthy parts of the digestive tract.

IBD is different from IBS (irritable bowel syndrome)

IBD and irritable bowel syndrome (IBS) are often mistaken for one another. Although both affect the gastrointestinal (GI) or digestive tract, the two conditions are different.

SIMILARITIES BETWEEN IBS AND IBD:

→ IBS and IBD are both chronic conditions that affect the digestive tract

→ IBS and IBD share symptoms like stomach pain and changes in bowel movements

DIFFERENCES BETWEEN IBS AND IBD:

→ IBS does not cause inflammation

→ IBS does not cause symptoms beyond the GI tract

→ IBD is an autoimmune disease, IBS is not

→ IBD causes damage to the digestive tract, IBS does not

The exact causes of IBD are complicated and not entirely clear; however, it is believed that a combination of the factors below may play a role

THE GENES YOU MAY HAVE INHERITED

5%–20% of people with IBD have an immediate family member with the disease.

ENVIRONMENTAL FACTORS

Factors like lifestyle and where you live may trigger an immune response.

YOUR BODY'S IMMUNE SYSTEM

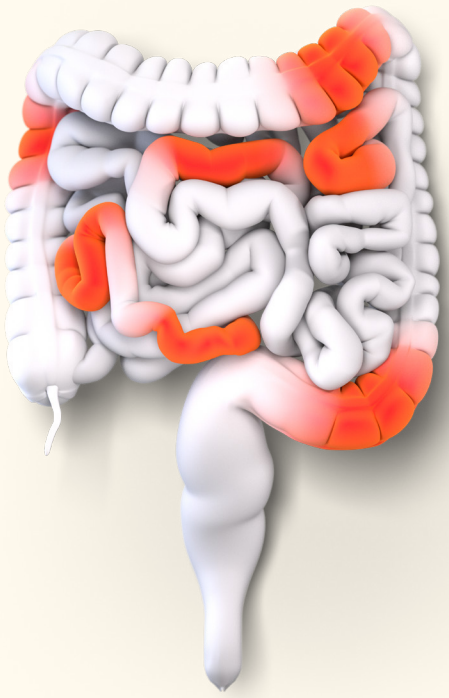
Your natural defense system has an abnormal reaction to certain environmental factors.

~2.4M **IBD AFFECTS ROUGHLY 2.4 MILLION AMERICANS**

There are 2 main types of IBD: Crohn's disease and ulcerative colitis (UC)

Your immune system normally protects your body from germs and infections. With inflammatory bowel disease (IBD), your immune system attacks your healthy digestive tract. This creates inflammation that can lead to tissue damage.

Crohn's disease



Crohn's disease can affect any part of the digestive tract, from the mouth to the anus

Crohn's disease is usually progressive, and many patients will experience worsening disease over time

Crohn's disease may appear in patches, affecting some areas of the digestive tract but not others

Inflammation may involve the entire thickness of the intestinal wall

Ulcerative colitis

Ulcerative colitis is only found in the large intestine (colon and rectum)

Ulcerative colitis may be progressive, meaning that some patients will experience worsening disease over time

Inflammation typically starts in the rectum, but may spread continuously to involve the entire colon

Inflammation only occurs in the innermost lining of the large intestine

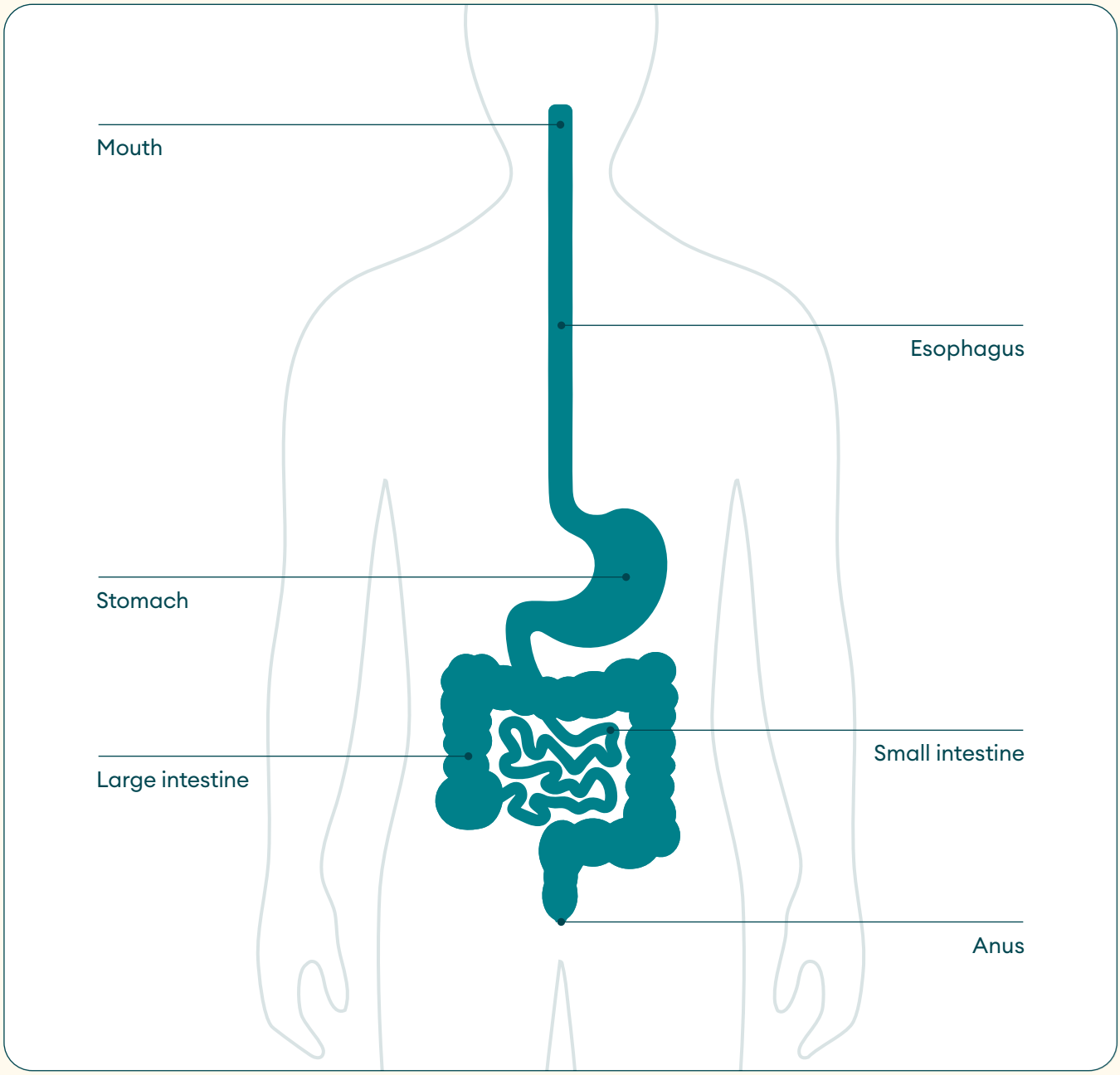
A focus on Crohn's disease

Crohn's disease may affect any part of the digestive tract

→ In people with Crohn's disease, after exposure to an environmental trigger, the immune system may mistakenly target the digestive tract, causing inflammation

→ With Crohn's, the inflammation may continue, leading to ulceration of the intestinal wall

→ Some common symptoms include diarrhea that typically isn't bloody, malnutrition, mouth sores, and abdominal pain



Crohn's disease can affect any part of your digestive tract, but most commonly affects the end of the small intestine (the ileum) and the beginning of the large intestine

When you have Crohn's, your immune system overreacts to substances in the GI tract

With Crohn's disease, inflammation in the GI tract may occur as follows:

1

ENVIRONMENTAL FACTORS TRIGGER AN IMMUNE RESPONSE

2

YOUR IMMUNE SYSTEM BECOMES ACTIVATED WHEN IT SHOULD NOT BE

3

INFLAMMATION OCCURS AND PERSISTS

Intestines **without** inflammation

Healthy intestines

Intestines **with** inflammation

In Crohn's, inflammation can skip between areas of the digestive tract, leaving some unaffected areas in between diseased areas

Crohn's is one of the main types of inflammatory bowel disease (IBD). It's a lifelong condition and it's usually progressive. But, with help from their care team, many people with Crohn's can manage their symptoms and have active lives.

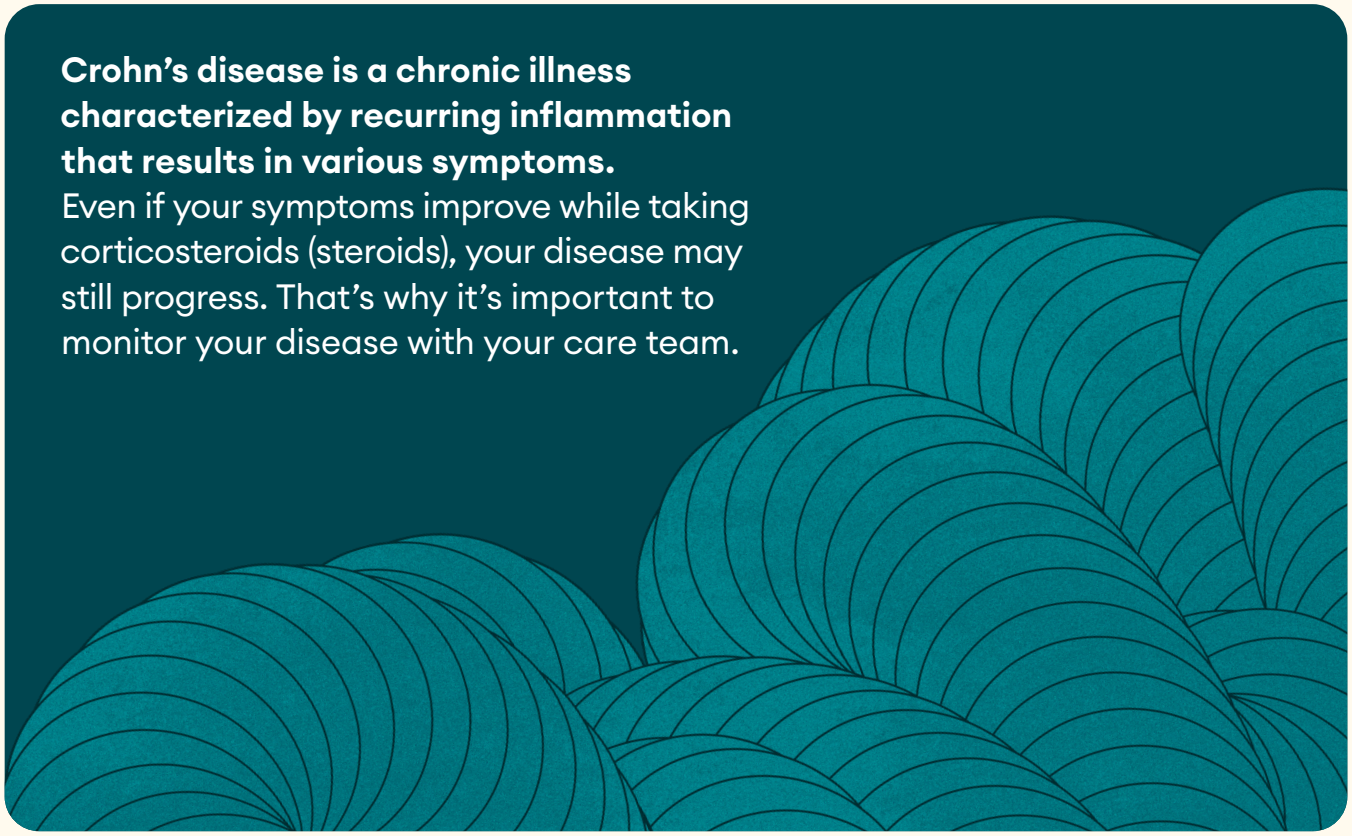
Severity and progression

There is no single test to assess and monitor Crohn's progression. Different clinical measures, how your symptoms impact your life, along with complications of the disease and of therapy will factor into how your healthcare provider makes an assessment related to your disease severity and progression. See the table below for more information on the levels of severity.

	Weight loss	Eating/ drinking	Fever	Abdominal mass	Diarrhea	Abdominal pain/tenderness	Symptoms
Remission	No	Normal	No	No	No	No	Without any symptoms
Mild	<10%	Normal	No	No	Possible	Possible	Symptoms, but with minimal impact on daily living
Moderate-severe	Significant	Impaired	Yes	Yes	Possible	Yes	Symptoms persist despite treatment
Severe-fulminant	Significant; muscle wasting	Impaired	Yes	Yes	Yes	Yes	Symptoms persist despite aggressive treatment; abscess and persistent vomiting possible

There are other things that help care teams determine the severity of your Crohn's. That information can typically be found by using a combination of testing and imaging. More information about these can be found on the following page.

Crohn's disease is a chronic illness characterized by recurring inflammation that results in various symptoms.
Even if your symptoms improve while taking corticosteroids (steroids), your disease may still progress. That's why it's important to monitor your disease with your care team.



How is Crohn's disease monitored?

Endoscopies, such as a colonoscopy, are used to monitor disease activity. Blood and stool tests are also typically used to monitor activity. Below are some common monitoring tests and procedures that your healthcare provider may order.

Endoscopic procedures

Colonoscopy
This procedure gives an inside look of your entire colon using a tiny tube that has a camera on the end.

Upper endoscopy
This procedure uses a tiny tube that has a camera on the end to examine the upper part of your digestive tract, including your esophagus, stomach, and beginning of your small intestine.

Blood tests

Blood samples are a useful way for healthcare providers to learn more about what's going on in the body.

C-reactive protein (CRP)
A type of protein that can be found in the blood. If there are higher levels of this protein, it means there is inflammation occurring in the body.

Erythrocyte sedimentation rate (ESR)
This test is used to find out if there is inflammation in the body based on how quickly red blood cells settle in a test tube.

Complete blood count (CBC)
This test measures your red and white blood cells, as well as hematocrit, hemoglobin, and platelets.

Imaging tests

Imaging can show the extent and severity of inflammation, as well as provide information about any other problems the disease may be causing.

X-ray
An X-ray of your abdomen can help assess different issues in your digestive system.

Computerized tomography (CT) scan
A CT scan uses X-rays along with a computer to create detailed images of your gut and surrounding areas.

Magnetic resonance imaging (MRI)
An MRI uses a magnetic field and radio waves to create images of your gut and surrounding areas without any exposure to radiation.

Ultrasound
An ultrasound uses sound waves to create images of structures inside the body.

Stool test

This may be useful in allowing healthcare providers to determine the level of inflammation in the digestive tract.

Fecal calprotectin
Fecal calprotectin levels can be used as a marker to detect inflammation in the intestine.

Managing Crohn's looks different for everyone. Your care team can help you create a plan that may include medications, nutrition, exercise, and other lifestyle strategies that work best for you.

Treatments

Below are some available prescription treatment options for Crohn's disease. Be sure to talk with your healthcare provider about your condition and symptoms that are bothering you. This could help when considering a management plan that's right for you.

5-aminosalicylic acids (5-ASAs)

A type of drug that reduces inflammation in the lining of the gut.

Corticosteroids (steroids)

A type of drug that works quickly to lower the activity of the immune system and decrease inflammation. They are usually only used for a short time because of their side effects.

They're often used as a "bridge" until maintenance treatments can reach full effect.

Immunomodulators

A type of drug that suppresses the immune system's ability to cause ongoing inflammation. They can take several months to improve symptoms.

Anti-integrins

Anti-integrins block inflammation-causing white blood cells from entering tissues throughout your body.

Biologic

Anti-TNFs

A type of medicine that blocks tumor necrosis factor (TNF) in the body to reduce inflammation in the intestine as well as other organs and tissues.

Biologic

Interleukin inhibitors

These medicines target and attach to proteins called interleukins, which play a role in the gut, as well as other organ and tissue inflammation.

Biologic

JAK inhibitors

JAK inhibitors target proteins called Janus kinases (JAKs), which play a role in activating the body's immune response. This results in reducing the activity of the immune system, which helps decrease inflammation.

Synthetic small molecule

Each treatment option comes with its benefits and potential risks, and depends on your individual situation.

Synthetic small molecule

Synthetic small molecule drugs can reduce inflammation in the intestines by targeting immune-system pathways. These are oral medications, which means you take them by mouth.

Biologic

Biologics are medicines made from living cells that are given by an injection or an infusion (a needle placed in your vein). They target proteins in the body that may be involved with the inflammation that occurs in IBD.

Shared decision-making

Your experience with inflammatory bowel disease (IBD) is unique to you. So, when it comes to making decisions around your care, your voice is an essential part of the process. Work with your care team to understand the potential benefits and risks of different options. Ask questions and share your preferences and values with them. Shared decision-making can help you feel more informed, supported, and empowered. Visit LivingwithIBD.com for tips and ways to start the conversation with your care team.

Living with IBD Patient Mentor Program

Talk to someone with Crohn's disease who can share their experiences on their IBD journey

If you've been recently diagnosed, it could help to talk to someone with experience and know-how of what life can be like with IBD. Hear about their experiences. Living with IBD Patient Mentors are here to help you learn more about Crohn's disease and ulcerative colitis, with phone-based support at a time that works with your schedule.

↗ **Connect with a mentor**

Living with IBD website

Living with IBD is a site that goes beyond definitions and charts and into the experiences of people living with IBD. Everyone's journey is unique, and this site can shed some light on how to navigate life with IBD.

↗ **Explore the site**

My IBD Symptom Tracker

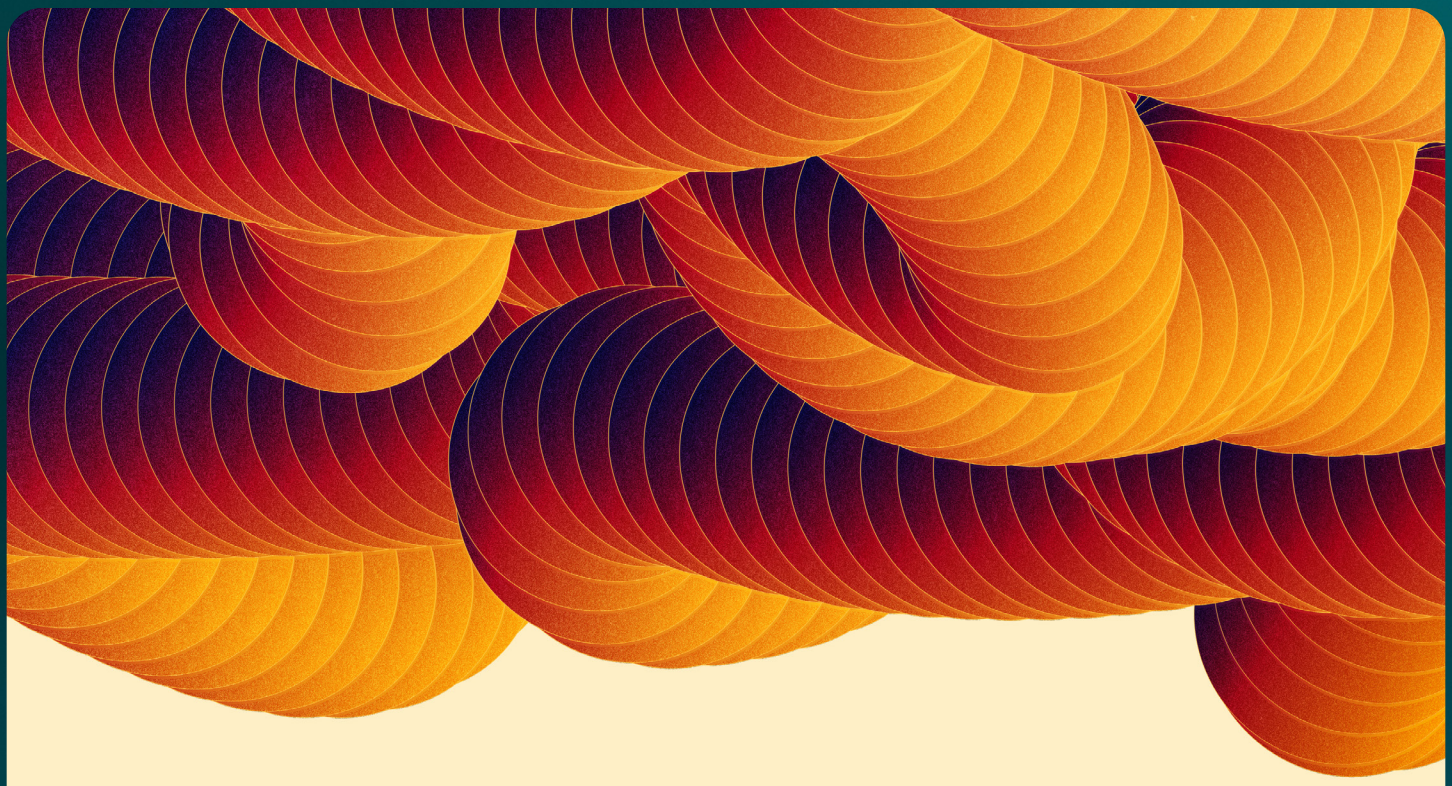
Track your symptoms and appointments. Get medication reminders. Find bathrooms when and where you need them. My IBD Symptom Tracker is all about getting you the resources you need.

Download on the App Store

Get it on Google Play

“My symptoms came and went. There were times when I felt I could manage it and there were times when I prayed I would make it to a bathroom in time.”

Ana Real patient with Crohn’s disease



Seeking treatment early and monitoring Crohn's is important

Continue your journey at LivingwithIBD.com

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