DECIDING ON THE BEST WAY TO USE MY ULCERATIVE COLITIS MEDICINES

Ulcerative colitis (UC) causes inflammation and ulcers (small sores) to form in the lining of the large bowel. Medicines called aminosalicylates (5-ASAs) can help reduce inflammation and control symptoms.

The active ingredients in 5-ASA medicines include:	Balsalazide	Mesalazine	Olsalazine	Sulfasalazine
The medicines are sold under these brand names:	Colazide	Asacol, Mesasal, Mezavant, Pentasa and Salofalk	Dipentum	Pyralin and Salazopyrin

You can use these medicines in several different ways (oral, rectal or a combination of both). This guide can help you decide which type of 5-ASA to use and what questions to ask your health care team.

1 Understand the facts

What are 5-ASAs?

These medicines work directly on the inner lining of the large bowel to reduce inflammation.

They are usually the **first medicines** your doctor prescribes for **mild to moderate** UC.

You will keep using these medicines long-term to keep your UC under control (**remission**).

What are the options?

How you use 5-ASAs depends on how severe and widespread your UC is, and which part of your large bowel is affected.

5-ASA medicines come in different forms

- Oral: tablets, capsules or granules that you swallow daily
- **Rectal:** medicines that you insert via your anus into your rectum (back passage, bottom), either as:
 - a suppository a small, solid, round or cone shaped medicine
 - an enema either liquid or foam, that is squeezed into your lower bowel using a special applicator usually at night

How you use the medicine	Oral	Rectal	Oral + rectal
Where it works			
How it works	Many oral medicines have a special coating to allow them to pass through your stomach and be released only when they reach your large bowel	 Medicine is delivered directly and in more concentrated doses to the lower part of the large bowel and rectum May initially take time and practice to get used to but easy to use once you get the hang of it 	A combination of oral and rectal 5-ASAs is the most effective treatment for active UC that extends past the rectum
	Oral	VS	Oral + rectal
	Symptoms improve for 4 out of 10 people		Symptoms improve for 6 out of 10 people







2 Decide what matters to you

Respond to the statements below to work out what matters most to you about your treatment options

- I want my treatment to give me the best chance of keeping my UC under long-term control I am prepared to give some time and practice to get used to using a rectal medicine
- I am not prepared to try using a rectal medicine

If you ticked yes for either of the first 2 statements, a rectal medicine may be an option to consider.

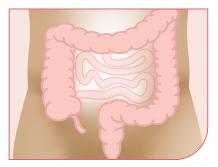
What else matters to you? Write down any questions to ask your gastroenterology team.

3 Do you know enough?

Do you have a good understanding of where your UC affects your large bowel and how this impacts which treatment option to try?

Ask your doctor to illustrate the extent of your UC on this diagram.

Yes



What do you need to find out before you make your decision?

I do not need to do anything else.					
I understand my options and am ready to make my decision. I am interested in using:					
Oral + rectal medicines	medicines only				
I need to learn more about my options by					
Talking with othersYour gastroenterologist or gastroenterology nurse. Take this with you to your next appointment to help guide the discussionAsk about your options if this treatment doesn't work for you	Visiting trusted websites Crohn's & Colitis Australia: crohnsandcolitis.com.au Gastroenterological Society of Australia: gesa.org.au NPS MedicineWise: nps.org.au				
Your GP or other health professional A trusted family member or friend	Keep track of your medicines and important health information using the MedicineWise app. Visit NPS MedicineWise at nps.org.au/medicinewiseapp for more information, or download the app on your smartphone today. Other				
An online or face-to-face support group					

+ TARGETED THERAPIES ALLIANCE

Helping consumers and health professionals make safe and wise therapeutic decisions about biological disease-modifying antirheumatic drugs (bDMARDs) and other specialised medicines. Funded by the Australian Government Department of Health through the Value in Prescribing bDMARDs Program Grant.







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