

Question 39 – Week of March 28

45 year old male with Crohn's disease had his second resection of his terminal ileum for fibrostenotic disease. You are considering prophylactic therapy because you consider this patient high risk for recurrent disease.

Which of the following therapies was reported in a recent study to effectively reduce endoscopic recurrence at 1 year?

- A. Metronidazole
- B. Infliximab
- C. Adalimumab
- D. 6-mercaptopurine
- E. Asacol

Answer: B

Crohn's disease commonly involves the terminal ileum and proximal colon. 75% of patients will require intestinal resection for complications relating to structuring and penetrating disease. Once resected, the majority of patients will get recurrent disease at the anastomosis. Literature for prevention of post operative recurrence of Crohn's disease has been unimpressive with agents such as metronidazole, 6-mercaptopurine and asacol.¹⁻³ A recent study showed that patients that received infliximab post operatively prevented endoscopic recurrence in 84.6% of patients vs. 9.1% in placebo arm.⁴ This is a compelling study, but still not routine practice at this time. More data is needed and studies are currently under way.