Evidence-based Medicine

Tra ipotesi di lavoro ed applicazione

Ferrara, 29-30 settembre 2000

Sessione Clinica

Evidence-based Clinical Problem Solving

1. Gastroenterologia

Copyright © - GIMBE®

Scenario Clinico (1)

- Il signor Saverio è un agente di polizia tributaria di 28 anni, fumatore, con una lunga storia di malattia di Crohn.

Copyright © - GIMBE®

Scenario Clinico (2)

4-87	comparsa di fistola perianale; alvo regolare
88	appendicectomia elettiva (!)
88	recidiva di fistola perianale
92	curettage chirurgico di fistola perianale
4-93	1° episodio di subocclusione intestinale
8-93	2° episodio di subocclusione intestinale La colonscopia evidenzia una flogosi a livello ileo-colico. L'esame istologico conferma la diagnosi endoscopica di malattia di Crohn

Copyright © - GIMBE®

Scenario Clinico (3)

93-97 Periodiche riaccensioni della malattia con caratteristiche prevalentemente infiammatorie trattate con steroidi o mesalazina

7-97 3° episodio subocclusivo

11-97 riacutizzazione della malattia di base a cui segue l'ileo con anastomosi latero-laterale di ansa ileale al tratto di passaggio tra cieco ed ascendente, sul profilo interno. Le anse digiunali e la porzione residua dell'ileo appaiono normodistribuite, con pareti soffici e normale rilievo valvolare. Buona opacizzazione dell'ansa anastomotica.

Copyright © - GIMBE®

Scenario Clinico (4)

12-98 Rx Clisma opaco

Stenosi tubulariforme dell'estremo distale del sigma (diametro max 1,5 cm) e dell'ampolla rettale di 10 cm.

Assenza di formazioni ascessuali.

Conclusioni: riacutizzazioni cliniche della malattia di base su stenosi serrata del giunto retto-sigmoideo

Copyright © - GIMBE®

CLINICAL QUESTIONS

Copyright © - GIMBE®

- Quali, tra le seguenti opzioni farmacologiche, sono efficaci nella malattia di Crohn sia per indurre la remissione, che per mantenerla?
  - Steroidi
  - Mesalazina
  - Immunosoppressori
  - Anticorpi monoclonali

- Qual ruolo hanno le diete liquide?

- La chirurgia può essere risolutiva ?

Copyright © - GIMBE®

Hanauer SB, Meyers S

Treatment Guideline
Crohn's Disease in Adults

Am J Gastroenterol 1997;92:599-66

Copyright © - **GIMBE**®

BRITISH SOCIETY OF GASTROENTEROLOGY

CLINICAL GUIDELINES

Inflammatory Bowel Disease

1996

Copyright © - **GIMBE**®

Sandborn W, Sutherland L, Pearson D,
May G, Modigliani R, Prantera C.

Azathioprine or 6-Mercaptopurine for inducing remission of Crohn's disease

(Cochrane Review)

The Cochrane Library, Issue 3, 2000. Oxford: Update Software.

Copyright © - GIMBE®

Pearson DC, May GR, Fick G, Sutherland LR.

Azathioprine for maintaining remission of Crohn's disease

(Cochrane Review)

The Cochrane Library, Issue 3, 2000. Oxford: Update Software.

Copyright © - GIMBE®

Steinhart AH, Ewe K, Griffiths AM, Modigliani R, Thomsen OO.

Corticosteroids for maintaining remission of Crohn's disease

(Cochrane Review)

The Cochrane Library, Issue 3, 2000. Oxford: Update Software.

Copyright © - GIMBE®

Cochrane Inflammatory Bowel Disease Group
Protocols

- 5-aminosalicylate for maintaining remission of Crohn's disease
- Antibiotics for inducing remission of Crohn's disease
- Budesonide for inducing remission of Crohn's disease
- Budesonide for maintaining remission of Crohn's disease
- Cyclosporine for inducing remission of Crohn's disease
- Cyclosporine for maintaining remission of Crohn's disease
- Enteral nutritional therapy for inducing remission of Crohn's disease

Copyright © - GIMBE®

Camma C, Giunta M, Rosselli M, Cottone M.

Mesalamine in the maintenance treatment of Crohn's disease: a meta-analysis adjusted for confounding variables.

Gastroenterology 1997;113:1465-73.

Copyright © - GIMBE®

• Mesalamine may be recommended for maintaining remission of quiescent Crohn's disease.

• The benefit is mainly observed in the postsurgical setting, in patients with ileitis and with prolonged disease duration.

Camma C, et al. Gastroenterology 1997

Copyright © - GIMBE®

Bell S, Kamm MA.

Antibodies to tumour necrosis factor alpha as treatment for Crohn's disease.

Lancet. 2000 Mar 11;355(9207):858-60.

Copyright © - **GIMBE**®

Placebo-controlled double-blind randomised trials of antibodies to TNF-α in Crohn's disease

Trial	**Drug**	**Patient Group**	**Follow-up**	**Clinical response**	**Remission or all fistula closed**
Stack et al[2] (n=31)	CDP571 5 mg /kg (1 dose)	CDAI 150-400	8 weeks	*Fall in median CDAI after 2 weeks* 96 points (CDP571) 6 points (placebo)	*CDAI<150 after 2 weeks* 29% CDP571 Placebo not reported
Targan et al[4] (n=108)	Infliximab 5 mg/kg 10 mg/kg (1 dose)	CDAI 220–400 (37% on azathioprine)	12 weeks	*Fall in CDAI≥70 points after 4 weeks* 65% infliximab 17% placebo	*CDAI≤150 after 4 weeks* 33% infliximab 4% placebo
Present et al[6] (n=94)	Infliximab 5 mg/kg 10 mg/kg (1 dose)	Draining perianal or abdominal fistula	14 weeks	*≥50% reduction number of fistulae* 62% infliximab 26% placebo	*All fistula closed* 46% infliximab 13% placebo
Rutgeerts et al[7] (n=73)	Infliximab 10 mg/kg 8 weekly (4 doses)	Patients who had responded to a single dose of 5 mg/kg	36 weeks	*Fall in CDAI≥70 points after 8 weeks* 62% infliximab 37% placebo	*CDAI≤150 after 8 weeks* 53% infliximab 20% placebo

Bell S, et al. Lancet 2000

Copyright © - GIMBE®

Korelitz BI

The role of liquid diet in the management of small bowel Crohn's disease

Inflamm Bowel Dis 2000;6:66-7

Copyright © - **GIMBE**®

Yamamoto T, Keighley MR

Smoking and disease recurrence after operation for Crohn's disease

Br J Surg. 2000 Apr;87(4):398-404

Copyright © - GIMBE®

- Smoking significantly increases the risk of recurrence of disease after operation for Crohn's disease, especially in women and heavy smokers.

- Encouraging patients to stop smoking is an important part of the management of Crohn's disease.

Yamamoto T, et al. Br J Surg 2000

Copyright © - GIMBE®

Lochs H, Mayer M, Fleig WE, et al.

Prophylaxis of postoperative relapse in Crohn's disease with mesalamine European Cooperative Crohn's Disease Study VI.

Gastroenterology 2000 Feb;118(2):264-73

Copyright © - GIMBE®

Ewe K, Bottger T, Buhr HJ, Ecker KW, Otto HF

Low-dose budesonide treatment for prevention of postoperative recurrence of Crohn's disease A multicentre randomized placebo-controlled trial. German Budesonide Study Group.

Eur J Gastroenterol Hepatol 1999 Mar;11(3):277-82

Copyright © - **GIMBE**®

Hellers G, Cortot A, Jewell D, et al.

Oral budesonide for prevention of postsurgical recurrence in Crohn's disease. The IOIBD Budesonide Study Group.

Gastroenterology 1999 Feb;116(2):294-300

Copyright © - GIMBE®