



INFLAMMATORY BOWEL DISEASE CLINIC

5-Aminosalicylic Acid (5-ASA) and Sulfasalazine

• Oral Preparations • Rectal Preparations •

5-ASA and sulfasalazine are bowel-specific drugs that act locally in the colon (large intestine) and have limited systemic effects. By inhibiting certain chemicals involved in the inflammatory process, these drugs can be used for achieving and maintaining remission in mild-to-moderate inflammatory bowel disease.

5-aminosalicylic acid may be prescribed as an oral tablet, rectal enema, or rectal suppository. Sulfasalazine is prescribed as an oral tablet. Your healthcare provider can choose from a number of oral 5-ASA products and sulfasalazine with different formulations, tablet coatings, and release characteristics to selectively tailor where the medication is delivered in the colon. Rectal preparations allow for topical delivery of 5-ASA in the rectum and lower colon, and may be used regularly in a patient's medication treatment plan or may only be used when needed to treat increased symptoms depending on disease location, extent, and severity.

Blood Work:

- **Monitoring blood work should be completed yearly** when you are taking an oral 5-ASA or sulfasalazine. Blood work orders for the lab should be provided to you.

Symptoms to Report:

- You should **stop this medication and contact your physician, nurse practitioner, or nurse immediately to report symptoms** of increasing abdominal pain or cramping after starting the 5-ASA or sulfasalazine, increasing diarrhea after starting the medication, fever, headache, malaise, feeling generally unwell, unusual tiredness or weakness, nausea with or without vomiting, skin itching or other skin reaction, or eye inflammation, as this may indicate hypersensitivity, intolerance, or allergy to the medication. **If your symptoms are severe or worsening, you should go immediately to the nearest emergency department or activate your emergency response system.**

Prevention of Adverse Events and Management of Side Effects:

- Before starting this medication, you should inform your gastroenterologist or nurse practitioner if you have a history of any problems or concerns with your liver (including hepatitis), kidneys, stomach or intestinal ulcers, sensitivity to salicylates, or sensitivity to sulfa products.

- To prevent or minimize the chance of having a flare of your IBD, 5-ASAs and sulfasalazine should never be abruptly stopped. If you have difficulty remembering to take your medication multiple times every day, or trying to schedule your medications with work or school, it may be possible to make changes to your medication plan, such as different formulations, different routes of administration, or different dosing schedules.

Pregnancy or Planning for a Pregnancy:

- If you or your partner are thinking about pregnancy, please contact your physician, nurse practitioner, or nurse to discuss the benefits and risks of continuing your prescribed 5-ASA or sulfasalazine prior to or during a future pregnancy. Males on sulfasalazine can have a decreased sperm count which is fully reversible with stopping the drug and changing to a different 5-Aminosalicylic Acid (5-ASA) product.
- Females: If you become pregnant, you should contact your physician, nurse practitioner, or nurse clinician to discuss the benefits and risks of continuing your prescribed 5-ASA or sulfasalazine during pregnancy. If you plan to breastfeed, your healthcare provider will advise you on any restrictions or specific instructions.