NCGC National Clinical Guideline Centre

Crohn's disease

Appendix Q

Clinical Guideline <...>

Sift audit

10 October 2012

NICE's original guidance on Crohn's disease: management in adults, children and young people was published in October 2012; it was partially updated in May 2016 when a new recommendation on inducing remission was added. It has now undergone a further partial update published in May 2019. The full, current recommendations can be found on the NICE website.

This document preserves evidence for areas of the guideline that have not been updated in 2019. Black shading indicates text from 2012 replaced by the 2019 update.

Commissioned by the National Institute for Health and Clinical Excellence











Published by the National Clinical Guideline Centre at The Royal College of Physicians, 11 St Andrews Place, Regents Park, London, NW1 4BT

First published 10 October, 2012

© National Clinical Guideline Centre - October, 2012

Apart from any fair dealing for the purposes of research or private study, criticism or review, as permitted under the Copyright, Designs and Patents Act, 1988, no part of this publication may be reproduced, stored or transmitted in any form or by any means, without the prior written permission of the publisher or, in the case of reprographic reproduction, in accordance with the terms of licences issued by the Copyright Licensing Agency in the UK. Enquiries concerning reproduction outside the terms stated here should be sent to the publisher at the UK address printed on this page.

The use of registered names, trademarks, etc. in this publication does not imply, even in the absence of a specific statement, that such names are exempt from the relevant laws and regulations and therefore for general use.

The rights of National Clinical Guideline Centre to be identified as Author of this work have been asserted by them in accordance with the Copyright, Designs and Patents Act, 1988.

Contents

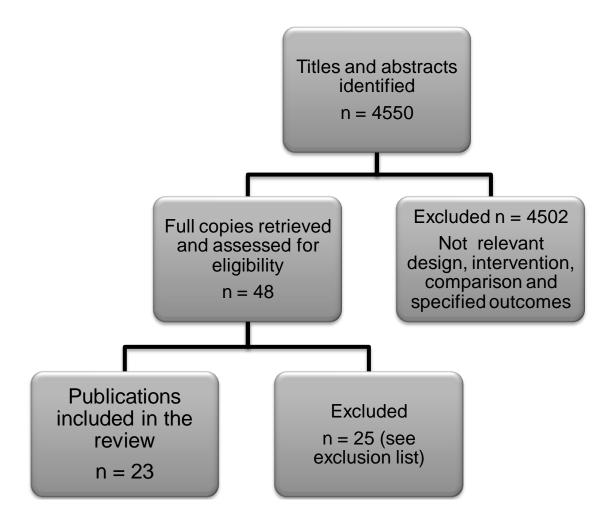
L	Sift a	udits	5	
	1.1	Conventional glucocorticosteroid treatment for inducing remission	5	
	1.2 Budesonide for induction of remission			
	1.3	5-ASA treatment for induction of remission	7	
	1.4	Immunosuppressive (AZA/MP; methotrexate) therapy for induction of remission	7	
	1.5	Conventional glucocorticosteroid treatment for maintaining remission	9	
	1.6	Budesonide for maintaining remission	10	
	1.7	5-ASA treatment for maintaining remission	11	
	1.8	Azathioprine/mercaptopurine for maintaining remission	12	
	1.9	Methotrexate for maintaining remission	13	
	1.10	Post-surgical maintenance of remission	14	
	1.11	Enteral nutrition for the induction of remission	15	
	1.12	Enteral nutrition for the maintenance of remission	16	
	1.13	Surgery versus medical management for disease limited to the distal ileum	17	
	1.14	Treatment of stricture in Crohn's disease: surgical management versus balloon dilation of stricture	18	
	1.15	Monitoring for osteopenia	19	
	1.16	Monitoring for early relapse	20	
	1.17	Patient information and support	21	
	1 10	Dorums	22	

1 Sift audits

1.1 Conventional glucocorticosteroid treatment for inducing remission

In individuals diagnosed with Crohn's disease what is the clinical and cost effectiveness of conventional glucocorticosteroid treatment for induction of remission

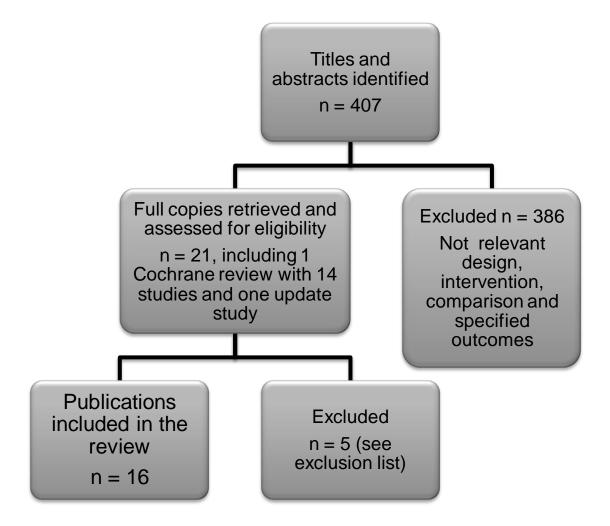
- compared with placebo?
- compared with 5-aminosalicylate (5-ASA) treatment?
- plus 5-ASA treatment compared with placebo?
- compared with azathioprine or mercaptopurine (AZA/MP)?
- plus azathioprine or mercaptopurine (AZA/MP) compared with conventional glucocorticosteroid treatment plus placebo?
- compared with methotrexate?
- plus methotrexate compared with conventional glucocorticosteroid treatment plus placebo?



1.2 Budesonide for induction of remission

In individuals diagnosed with Crohn's disease what is the clinical and cost effectiveness of low dose and high dose budesonide for induction of remission compared with

- placebo?
- conventional glucocorticosteroid treatment?
- 5-aminosalicylate (5-ASA) treatment?
- azathioprine or mercaptopurine (AZA/MP)?
- methotrexate?



1.3 5-ASA treatment for induction of remission

In individuals diagnosed with Crohn's disease what is the clinical and cost effectiveness of 5-aminosalicylate (5-ASA) treatment for induction of remission compared with

- placebo?
- azathioprine or mercaptopurine (AZA/MP)?
- methotrexate?

1.4 Immunosuppressive (AZA/MP; methotrexate) therapy for induction of remission

In individuals diagnosed with Crohn's disease what is the clinical and cost effectiveness of azathioprine or mercaptopurine (AZA/MP) for induction of remission compared with

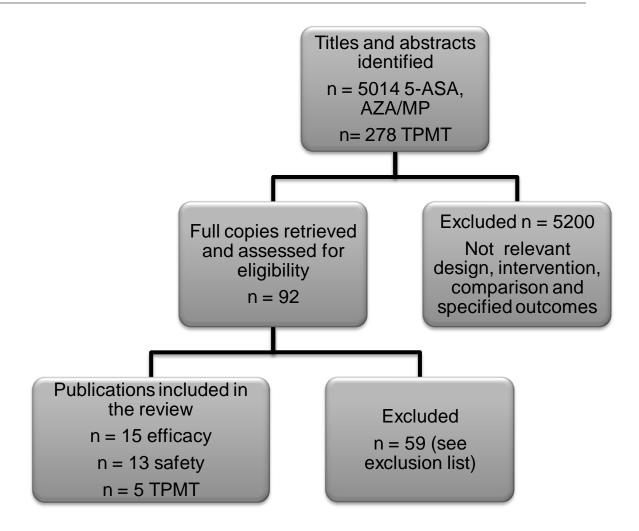
- placebo?
- methotrexate?

In individuals diagnosed with Crohn's disease what is the incidence of serious adverse events for the following subgroups:

- normal blood TPMT activity, on a standard dose of azathioprine
- low blood TPMT activity, on a low dose of azathioprine
- blood TPMT is unknown, on a standard dose of azathioprine?

In individuals diagnosed with Crohn's disease what is the clinical and cost effectiveness of methotrexate for induction of remission

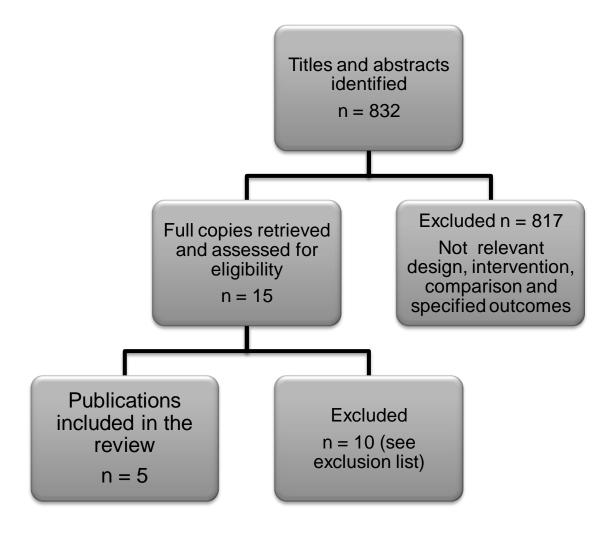
- compared with placebo?
- *plus* conventional glucocorticosteroid treatment compared with placebo *plus* conventional glucocorticosteroid treatment?



1.5 Conventional glucocorticosteroid treatment for maintaining remission

In individuals diagnosed with Crohn's disease what is the clinical and cost effectiveness of conventional glucocorticosteroid treatment for maintenance of remission for 12 months or longer

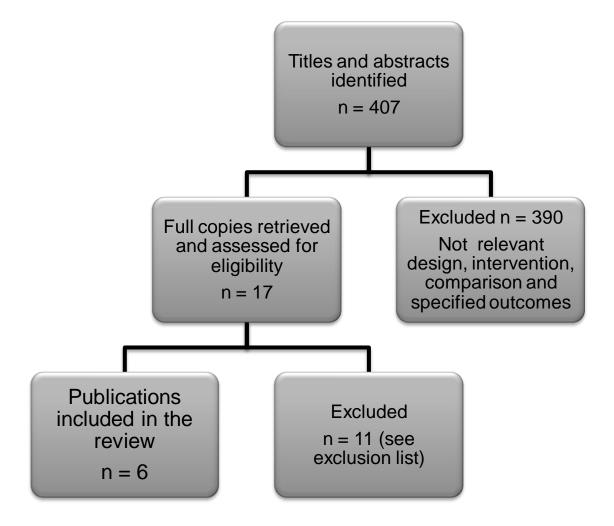
- · compared with placebo?
- compared with 5-aminosalicylate (5-ASA) treatment?
- plus 5-ASA treatment with conventional glucocorticosteroid plus placebo?
- compared with azathioprine or mercaptopurine (AZA/MP)?
- *plus* azathioprine or mercaptopurine compared with conventional glucocorticosteroid treatment *plus* placebo?
- methotrexate?



1.6 Budesonide for maintaining remission

In individuals diagnosed with Crohn's disease what is the clinical and cost effectiveness of low dose and high dose budesonide for maintenance of remission for 12 months or longer compared with

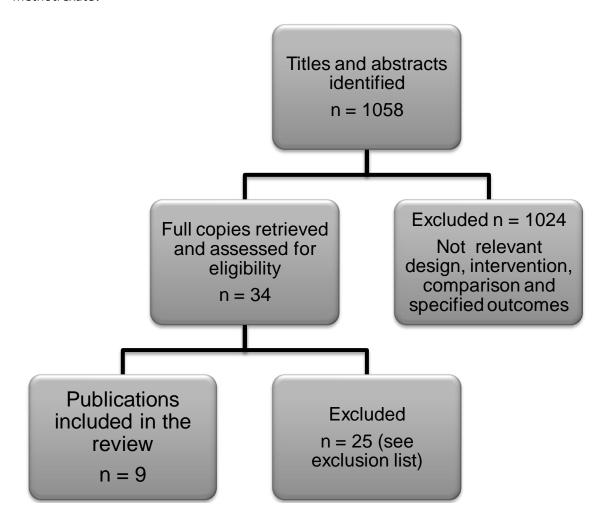
- placebo?
- conventional glucocorticosteroid treatment?
- 5-aminosalicylate (5-ASA) treatment?
- azathioprine or mercaptopurine (AZA/MP)?
- methotrexate?



1.7 5-ASA treatment for maintaining remission

In individuals diagnosed with Crohn's disease what is the clinical and cost effectiveness of 5-aminosalicylate (5-ASA) treatment for maintenance of remission compared with

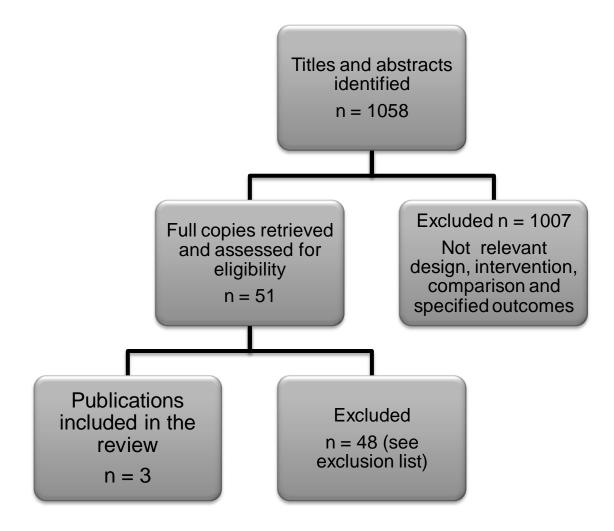
- placebo?
- azathioprine or mercaptopurine (AZA/MP)?
- methotrexate?



1.8 Azathioprine/mercaptopurine for maintaining remission

In individuals diagnosed with Crohn's disease what is the clinical and cost effectiveness of azathioprine or mercaptopurine (AZA/MP) for maintenance of remission for 12 months or longer

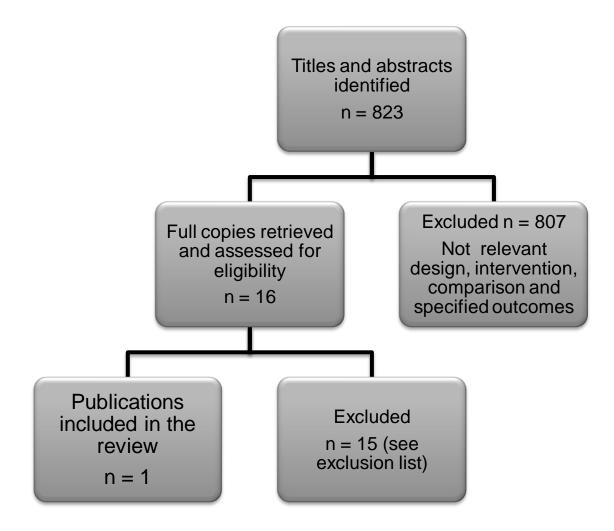
- compared with placebo?
- compared with methotrexate?
- plus conventional glucocorticosteroid or 5-ASA treatment compared with placebo plus conventional glucocorticosteroid or 5-ASA treatment?



1.9 Methotrexate for maintaining remission

In individuals diagnosed with Crohn's disease what is the clinical and cost effectiveness of methotrexate for maintenance of remission for 12 months or longer

- compared with placebo?
- *plus* conventional glucocorticosteroid treatment compared with placebo *plus* conventional glucocorticosteroid treatment?



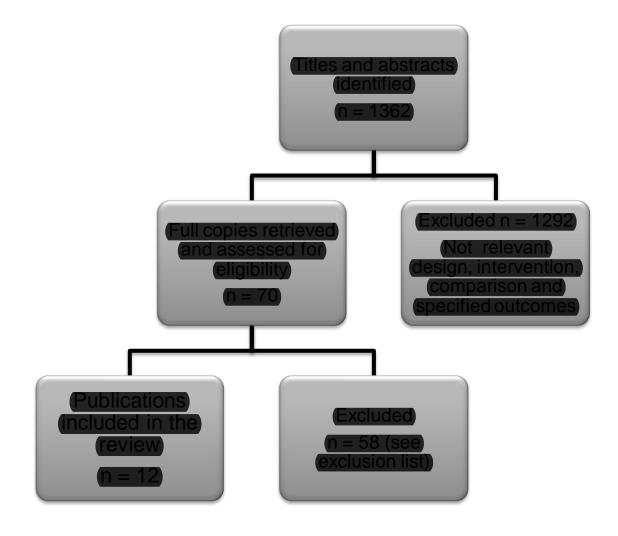
1.10 Post-surgical maintenance of remission

Please note that evidence on treatments for post-surgical maintenance of remission in Crohn's disease was reviewed in 2019. The updated evidence review and full current recommendations can be found on the NICE website.

- conventional glucocorticosteroid treatment
- budesonide
- 5-aminosalicylate treatment
- azathioprine
- mercaptopurine
- methotrexate
- metronidazole or
- (combinations thereof)
- or nutritional treatment)

compared with

- placebo
- no treatment ?

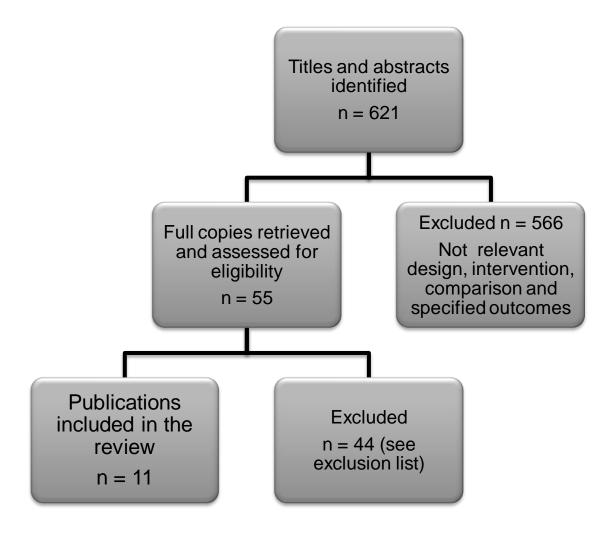


1.11 Enteral nutrition for the induction of remission

In adults and children diagnosed with Crohn's disease what is the clinical and cost effectiveness of enteral nutrition (elemental, semi-elemental and polymeric) as a sole source of nutrition for induction of remission compared with

- usual diet
- conventional glucocorticosteroid treatment
- budesonide
- a combination of conventional glucocorticosteroid treatment plus 5-ASA treatment
- a combination of conventional glucocorticosteroid treatment *plus* azathioprine or mercaptopurine
- a combination of conventional glucocorticosteroid treatment *plus* methotrexate?

In adults and children diagnosed with Crohn's disease what is the clinical and cost effectiveness for induction of remission of enteral nutrition (elemental, semi-elemental and polymeric) plus medical therapy versus usual diet?



1.12 Enteral nutrition for the maintenance of remission

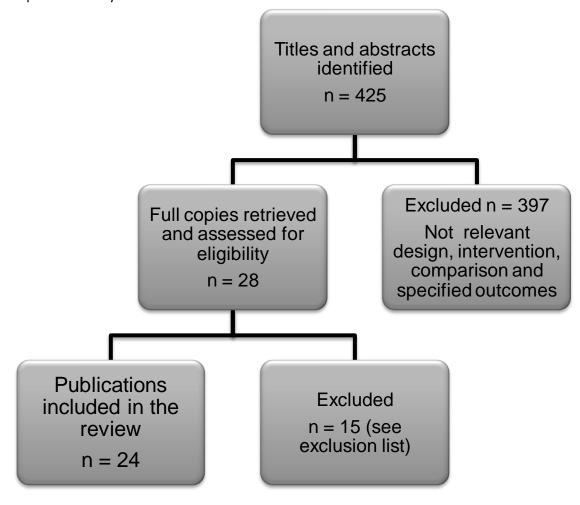
What is the clinical and cost effectiveness of enteral nutrition (elemental, semi-elemental and polymeric) for maintenance of remission compared with

- usual diet?
- medical treatment?
- conventional glucocorticosteroid treatment?
- budesonide?
- 5-ASA treatment?
- azathioprine or mercaptopurine?
- methotrexate?

What is the clinical and cost effectiveness of enteral nutrition (elemental, semi-elemental and polymeric) for maintenance of remission in combination with

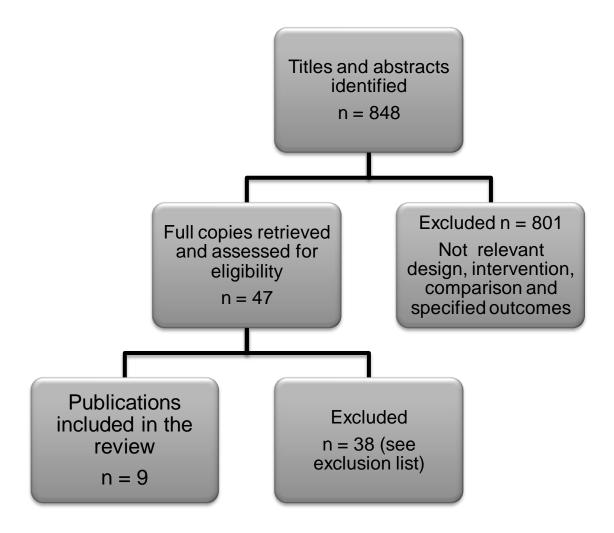
- conventional glucocorticosteroid treatment
- budesonide
- 5-ASA treatment
- azathioprine or mercaptopurine
- methotrexate

compared with any of the above?



1.13 Surgery versus medical management for disease limited to the distal ileum

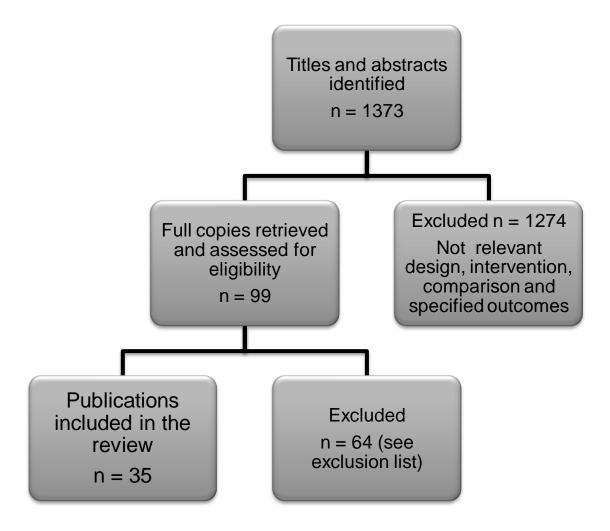
In individuals diagnosed with Crohn's disease limited to the distal ileum, what is the clinical and costeffectiveness of surgical resection for induction and maintenance of remission compared with medical or nutritional treatment?



1.14 Treatment of stricture in Crohn's disease: surgical management versus balloon dilation of stricture

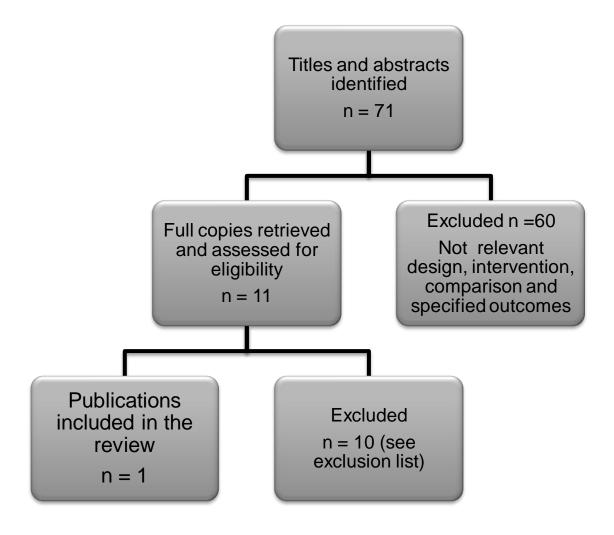
In individuals diagnosed with Crohn's disease what is the clinical and cost effectiveness of surgical treatment of stricture compared with

- balloon dilation?
- balloon dilation plus intralesional glucocorticosteroid injections?
- conservative management?



1.15 Monitoring for osteopenia

In children with Crohn's disease what is the risk of fracture?

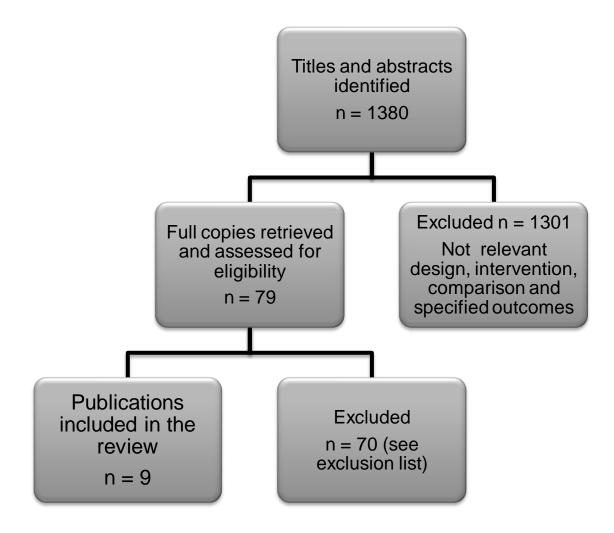


1.16 Monitoring for early relapse

Does predicting early relapse through monitoring

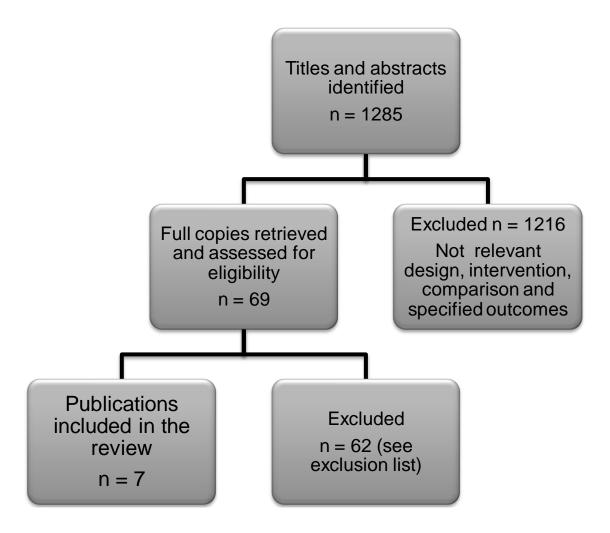
- Unintended weight loss,
- CRP,
- ESR,
- MRI,
- Calprotectin,
- Colonoscopy/capsule endoscopy or
- Growth in children

compared to standard care, improve patient outcomes (quality of life, future surgery, hospitalization)?



1.17 Patient information and support

- What are the primary information needs of adults with Crohn's disease in the UK?
- What are the primary information needs of children and young people with Crohn's disease in the UK?



1.18 Reruns

All above searches were updated on 13 March 2012, and the following studies were identified:

