

Azathioprine or Mercaptopurine Therapy for Inflammatory Bowel Disease (IBD)

Azathioprine or Mercaptopurine Therapy for IBD

- Your health care provider feels that either of these medications may help you manage your over-active immune response:
 - › Azathioprine (a-za-THY-o-preen) (Imuran®)
 - › Mercaptopurine (mur-CAP-toe-pure-een)

What are azathioprine (AZA) and mercaptopurine (6-MP)?

- The cells in your body that fight infection and inflammation (swelling) are known as the immune system. If your immune system is too active, it can cause inflammation and damage to body tissues and organs (like the bowel).
- Diseases that cause your immune system to be too active include:
 - › Rheumatoid arthritis
 - › Certain types of liver disease
 - › Inflammatory bowel disease (IBD) (like Crohn's disease, ulcerative colitis)
- AZA is an immunosuppressive medication. This means it suppresses (weakens) the immune response, which lowers inflammation.

- 6-MP is a medication that is similar to AZA, but your body breaks it down in a different way. This makes it less likely to cause nausea (feeling sick to your stomach) and vomiting (throwing up).
- 6-MP costs more than azathioprine.
- If you have nausea or vomiting when taking AZA, talk to your health care provider.

How well does AZA work?

- When AZA is used alone, it helps many people control diseases that cause an over-active immune response.
- Take this medication as told by your health care provider. This increases the chance that it will work well.

Combination therapy in IBD

- AZA and 6-MP are sometimes used together with medications called biologics. Biologics are special medications that are also used to treat IBD. AZA and 6-MP may:
 - › help a biologic work better to treat IBD.
 - › lower the chance of getting anti-medication antibodies. These antibodies may cause your body to not respond well to the biologic.

What are the possible side effects?

Less serious side effects:

- During the first few weeks of taking the medication, you may have:
 - › Upset stomach or nausea
 - › Diarrhea (loose, watery poop)

These side effects usually go away after taking the medication for 10 to 14 days. Taking the medication with meals may help to lower these symptoms. Other less serious side effects include:

- › Allergic reaction
- › Skin rash
- › Fever (temperature above 38.5 °C or 100.4 °F)
- › Muscle aches, joint pains
- › Skin infection

Serious side effects:

- **Bone marrow suppression** (when your bone marrow makes less blood cells): **This is serious and life-threatening.**
 - › Your health care provider can do a blood test to check the levels of thiopurine methyltransferase (TPMT) in your blood before you start taking the medication.

If you have low TPMT levels:

- › You may be at a higher risk of bone marrow suppression.
- › Treatment will not be given.
- **Pancreatitis:** You may have an inflamed pancreas within 1 to 2 months after starting the medication. This can cause very bad abdominal (belly) pain and vomiting. **If you have these symptoms, go to the nearest Emergency Department right away.**
- **Hepatitis** (liver inflammation): You will have regular blood tests to check for this. If you have hepatitis, it will go away when you stop taking the medication.
- **During pregnancy:** The biggest risk during pregnancy is a flare-up of your disease. Most people who are doing well on the medication and get pregnant can keep taking the medication for their whole pregnancy. **Talk to your health care provider if you get pregnant or plan to get pregnant.** Birth defects have not been found in people using these medications.
- **Cancer:** Using these medications for a long time can slightly raise your risk of getting cancer.

You have a higher chance of getting lymphoma (cancer of the lymphatic system) or leukemia (cancer of the blood cells) if:

- › You have had a kidney transplant.
- › You have rheumatoid arthritis and need large doses of the medication.

Your risk of skin cancer increases. **It is very important to protect your skin from the sun (wear sunscreen, long-sleeved shirts, hats) while taking the medication.** Tell your health care provider if you see any unusual moles or skin sores.

Your health care provider will help you watch for these symptoms. They may lower your dose or tell you to stop taking this medication, if needed.

If you have any other side effects, talk with your health care provider.

What can I do to lower the chance of side effects?

- Take your medication with meals.
- Get a blood test before you start taking the medication. This will tell your health care provider if the medication could cause bone marrow suppression.

- While you are taking the medication, have blood tests done as often as your health care provider tells you to.
- **Talk to your health care provider before you get any live vaccinations. This does not include flu or COVID shots.** Everyone should get a flu vaccination and a COVID vaccination every year.
- **Do not start taking any new medications without talking to your health care provider first.** Some medications can cause problems when taken at the same time as AZA and 6-MP.
- Tell your health care provider if you have any allergies or infections.
- Have a regular check-up at least once a year with your primary health care provider (family doctor or nurse practitioner).
- Talk with your health care provider before taking the medication if you:
 - › Are pregnant or breastfeeding
 - › Have liver or kidney disease
 - › Have shingles, an infection, or gout
- Use sunscreen or sunblock with a sun protection factor (SPF) of at least 15. Wear long-sleeved shirts and hats. Avoid direct sunlight. **Do not** use sunlamps or tanning beds.

- Talk to your primary health care provider if you see any unusual moles or skin sores anywhere on your body.

Concerns

- You may be worried that these medications are too dangerous.
- Serious side effects are rare. There is less risk from these medications than there is from your disease.

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find this pamphlet and all our patient resources here:
<https://library.nshealth.ca/Patients-Guides>

Connect with a registered nurse in Nova Scotia any time:
Call 811 or visit: <https://811.novascotia.ca>

Prepared by: Nova Scotia Collaborative Inflammatory Bowel Disease Program
Designed by: Nova Scotia Health Library Services

QV85-1079 © August 2024 Nova Scotia Health Authority
To be reviewed August 2027 or sooner, if needed.