

Table 6

Induction of remission for Crohn's disease¹⁸

	Monotherapy	Add-on immunomodulator therapy
First presentation CD or a single inflammatory relapse in a 12-month period	1 Conventional glucocorticoids (PO or IV) 2 Budesonide [¶] 3 Aminosalicylates [¶] (less effective than 1 and 2) 4 Consider enteral nutrition ^ψ 5 Surgery (limited terminal ileal disease)	1 Azathioprine /6-mercaptopurine ^ω or 2 Methotrexate ^η
Severe active CD ^λ		1 IV corticosteroids ± immunomodulator treatments 2 Infliximab ^δ 3 Adalimumab ^δ 4 Surgery
Active fistulating CD		1 Antibiotics 2 Surgical drainage 3 Seton insertion 4 Immunomodulator treatments 5 Infliximab

[¶] In patients with ileal, ileocaecal or right-sided colonic disease who decline or cannot tolerate conventional steroids as well as those with contraindications for steroid use

^ψ In children or young adults when there are concerns about growth or side effects

^ω If there are two or more relapses over a 12-month period or if steroids cannot be tapered

^η If azathioprine/6-mercaptopurine cannot be tolerated or if TPMT level is deficient

^δ If no response to conventional therapy with steroids ± immunomodulators or intolerance/contraindications to conventional therapy

^λ Defined as Crohn's Disease Activity Index (CDAI) score of 300 and over or Harvey-Bradshaw score of 8-9 and above