

Inflammatory bowel disease

Azathioprine/6-Mercaptopurine (6-MP)

Gastroenterology Department



Patient information leaflet

This medication is given along with the Crohn's and Colitis UK leaflet and we do advise that you discuss any questions or queries with your specialist consultant/nurse before starting this medication.

What is Azathioprine/6-Mercaptopurine (6-MP)?

These medications are given to avoid a flare up in your condition and to avoid the need for repeated prescriptions of steroids. If your mesalazine medications are not controlling your Crohn's Disease or Ulcerative Colitis and you require a course of steroids more than 2-3 times per year then we may need to prescribe Azathioprine/6-MP.

Both drugs act in a similar way and azathioprine is changed into mercaptopurine once in the body. They are called immunosuppressants and reduce inflammation by dampening down the immune cells that trigger inflammation in IBD.

They are given in tablet form and you will be advised on your dose and when to take these.

Azathioprine and 6-MP do not work immediately and it may take up to 3 months before the full benefits of the drug are seen. Sometimes steroids are given alongside the Azathioprine/6-MP and when the steroid dose is lowered down Azathioprine/6-MP should be taking full effect.

What dose will I be given?

The usual dose for Azathioprine is 2mg-2.5mg/kg so therefore each dose is dependent on how much you weigh. The dose for 6-MP is 1mg-1.5mg/kg.

What tests will I need prior to starting this medication?

Before we start treatment you will need to undergo blood tests so that a baseline can be seen prior to starting medication. We will also want to ensure that you have no underlying infections or abnormalities in your blood as the medication is an immunosuppressant and can affect your white blood cells which fight infection and also may cause some abnormalities of the liver. Your specialists will discuss this further with you at your consultation.

What tests will I need after starting the medication?

You will need your blood tested regularly when starting the medication in the following regime:

- Weekly for the first 4 weeks
- Fortnightly for 4 weeks
- Every 3 months thereafter if your blood tests are stable

Why is it important to have my blood tested?

The reason for having your blood checked so frequently is to ensure that your body is producing enough white blood cells to fight infection or that the medication has not caused any abnormalities in your liver.

If you do not have your blood tests then this may lead to the clinicians stopping medication or asking your GP to no longer prescribe the medication. This is due to the importance of blood monitoring and the effects it may have on your immune system and liver if not monitored.

What side effects might I have from the medication?

A small number of patients will develop side effects and your medication may need to be stopped. You will be seen regularly at the beginning of treatment and we strongly urge you to contact your nurse specialist or consultant if you do develop any side effects when commencing treatment. These may include;

- Nausea/vomiting and loss of appetite
- New onset of abdominal pain
- Hair loss
- Fever, weakness and fatigue
- Unusual bleeding/bruising
- Jaundice (yellowing of the skin)
- Skin rashes

If you experience high fevers or severe abdominal pain then you should attend the Emergency Department for review.

Is there any special considerations to consider whilst I am on treatment?

You must not have any live vaccinations whilst on Azathioprine/6-MP. Please discuss your medication with your specialist if any vaccinations are needed.

It is recommended that if travelling abroad and vaccinations are needed that you discuss this with your travel nurse, for example Yellow fever vaccination must not be given.

Long term use of azathioprine/6MP may increase your risk of developing certain types of cancer, especially skin cancer and lymphoma (cancer that begins in the cells that fight infection). These medications also increase your sun-sensitivity; to decrease these risks high sunscreen and protective clothing should be used to reduce sunlight exposure.

Other medications may interact with Azathioprine/6-MP so always discuss these with your doctor.

Is there any alternatives?

You have been prescribed Azathioprine by your Gastroenterologist as your symptoms have not been controlled on your present medication or multiple courses of steroids have been required. Any alternative medications will be discussed with you by your specialist.

Key reference source

Crohn's and Colitis UK

Monitoring and blood tests

My Consultant is: _____

Condition: _____

Date of Diagnosis: _____

Medications

Name of Medication	Dose	How often I take it

Blood test dates

Frequency	Date	Results
Week 1 (Weekly for 1st 4 weeks)		
Week 2		
Week 3		
Week 4		
Week 6 (Fortnightly for 1 month)		
Week 8		
Every 3 months if stable		

It is strongly recommended that you have the yearly Flu vaccination and every 5 years have the Pneumococcal vaccination.

The Inflammatory Bowel Disease Team

Gastroenterologists

- Dr Michelle Gallagher 01483 571122 ext 4846
- Dr Christopher Tibbs 01483 571122 ext 4521
- Dr Charmian Banks 01483 571122 ext 4521
- Dr Kalliopi Alexandropoulou 01483 571122 ext 4933
- Professor Aftab Ala 01483 571122 ext 6519

Inflammatory Bowel Disease Nurse Specialist

01483 571122 ext 2423

Please note you will need to contact the IBD Helpline for further prescription if you are a new starter.

Contact details

Inflammatory Bowel Disease Nurse Specialist

Telephone: 01483 571122 **ext** 2423

PALS and Advocacy contact details

Contact details of independent advocacy services can be provided by our Patient Advice and Liaison Service (PALS) who are located on the right hand side as you enter the main reception area. PALS are also your first point of contact for health related issues, questions or concerns surrounding RSCH patient services.

Telephone: 01483 402757

Email: rsc-tr.pals@nhs.net

Opening hours: 9.00am–3.00pm, Monday to Friday

If you would like information documents in large print, on tape or in another language or form please contact PALS.

Past review date: January 2018

Future review date: January 2021

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PIN180118–1457

