



Patient Information Sheet: Azathioprine or 6-mercaptopurine (6-MP) for IBD

Common brand name: Imuran® or Purinethol®

What is azathioprine and 6-mercaptopurine?

These are two closely related medications that reduce inflammation in the lining of the intestine by acting as immunosuppressants (suppress your immune system).

When is azathioprine/6-mercaptopurine used?

Azathioprine/6-mercaptopurine has been shown to be effective in some patients with Crohn's disease or ulcerative colitis. Azathioprine/6-mercaptopurine is best used to help patients withdraw from prednisone without their disease flaring and maintain remission. Azathioprine/6-mercaptopurine does not work on all patients. The decision to use these medications must be made by your IBD health practitioner who will determine this on a case-by-case basis. Azathioprine/6-mercaptopurine may also be used together with anti-TNF biologic therapies (infliximab/Remicade® or adalimumab/Humira®) to improve and prolong their effectiveness.

How is azathioprine/6-mercaptopurine given?

These medications are available as an oral tablet. It takes between 3 to 4 months for these medications to have an effect on symptoms. During this time period, your IBD health practitioner will usually leave you on other medications until the azathioprine/6mercaptopurine takes effect.

What are the side effects of azathioprine/6-mercaptopurine?

1. Minor side effects from azathioprine/6-mercaptopurine include fatigue and nausea. The nausea will usually respond well to Gravol.
2. Lowering of white and red blood cell counts (uncommon). As a result of the lowered white blood cell count, you are at a slight increased risk of infection. You may also experience fever, chills, sore throat, unusual tiredness or weakness, unusual bleeding, or bruising. Please contact your IBD health practitioner if any of these occur.
3. Inflammation in the liver (rare). Inflammation in the liver is easily identified by blood tests, so it is important to do your bloodwork. Your medication will be stopped and the inflammation will resolve.
4. Inflammation in the pancreas (rare). Inflammation in the pancreas will cause sudden severe stomach pain. **You must stop this medication and go to the nearest emergency**



department if you develop sudden and severe abdominal pain (with or without vomiting and fever).

You should stop this medication and contact your IBD health practitioner immediately if you have symptoms of severe nausea (with or without vomiting), fever, rash or other skin reaction such as blistering or peeling, unusual bleeding or bruising, joint pain, malaise, muscle ache, kidney problems, feeling faint especially when standing up, difficulty breathing, and/or diarrhea that has increased since starting the medication as this may indicate hypersensitivity, intolerance, or allergy to this medication. If your symptoms are severe or worsening, you should go immediately to the nearest emergency department or activate your emergency response system.

Can I get cancer from this medication?

Azathioprine/6-mercaptopurine can, very slightly, increase your risk of a lymph node cancer, called lymphoma, and skin cancer. However, the risk of not treating your Crohn's disease or ulcerative colitis properly is far worse than any remote risk of lymphoma or skin cancer. While on azathioprine/6-mercaptopurine, you should limit sun exposure and use sun protection when outside (hats, sunscreen, sunglasses protective clothing). Please feel free to discuss this with your IBD health practitioner.

When should I get blood tests?

While you are on azathioprine/6-mercaptopurine, your IBD health practitioner will order and monitor blood tests. Complete blood cell count and liver function tests will be done regularly. These will vary from every week to every month.

Prevention of Adverse Events and Management of Side Effects:

- You need to contact your IBD health practitioner if you are on allopurinol (Zyloprim®), a medication commonly prescribed for gout, as your dose of azathioprine/6-mercaptopurine will need to be adjusted in order to prevent serious complications.
- You need to contact your IBD health practitioner if you are on angiotensin-converting enzyme inhibitors, mainly prescribed for the treatment of high blood pressure or heart failure; co-trimoxazole (Septra®, an antibiotic prescribed for the treatment of infections); warfarin (a blood thinner prescribed for the prevention of blood clots); OR mezalazine, mesalamine, olsalazine or sulphasalazine (aminosalicylates prescribed for the treatment of inflammatory bowel disease). Azathioprine/6-mercaptopurine can interact with these other medications and your dose may need to be adjusted in order to prevent serious complications.



- Do not use echinacea or cat's claw (herbal remedies) when taking this medication.
- Take this medication at bedtime, after meals, or in divided doses if it makes you feel nauseated. You can also try frequent mouth care (like brushing your teeth or rinsing with mouth wash), sucking on hard sugar-free candies, or consuming small frequent meals. Contact your IBD health practitioner if your nausea does not improve.