

Azathioprine appears to improve disease course in early Crohn's

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(HealthDay)—Long-term use of azathioprine (AZA) is associated with a

better disease course in patients with early Crohn's disease (CD), according to a study published online Sept. 22 in the *Journal of Gastroenterology and Hepatology*.

Yun Qiu, from Sun Yat-sen University in China, and colleagues evaluated the impact of AZA on [disease](#) progression in a cohort of 190 [patients](#) with early CD (disease duration ≤ 18 months) and no previous use of disease-modifying agents.

The researchers found that over a median follow-up of 57 months, 31 patients underwent abdominal surgeries, 48 patients were hospitalized, and 68 patients experienced clinical flares. The cumulative rate of remaining free of CD-related bowel [surgery](#), hospitalization, and flares after five years on AZA treatment was 0.65, 0.59, and 0.39, respectively. Prior bowel resection (hazard ratio [HR], 9.23; smoking (HR, 4), and hemoglobin 36 months (HR, 0.04) was associated with reduced CD-related operations.

"Prolonged use of AZA was associated with a more favorable disease course of early CD, evident as a lower risk of CD-related surgery," conclude the authors.

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract](#)
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