

Recommendations provided for treatment of ulcerative colitis

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(HealthDay)—In a new clinical guideline from the American

Gastroenterological Association, recently published in *Gastroenterology*, treatment recommendations are presented for patients with moderate-to-severe ulcerative colitis (UC).

Joseph D. Feuerstein, M.D., from the Beth Israel Deaconess Medical Center in Boston, and colleagues developed guidelines for medical management of adult outpatients with [moderate-to-severe](#) UC.

The authors recommend using infliximab, adalimumab, golimumab, vedolizumab, tofacitinib, or ustekinumab over no treatment in adult outpatients with moderate-to-severe UC for induction and maintenance of [remission](#). Infliximab or vedolizumab are recommended over adalimumab for induction of remission in adult outpatients with moderate-to-severe UC who are naive to [biologic agents](#); tofacitinib should only be used in the setting of a clinical or registry study. Ustekinumab or tofacitinib are suggested rather than vedolizumab or adalimumab for induction of remission in adult outpatients with moderate-to-severe UC who have previously been exposed to infliximab, particularly those with primary nonresponse. Thiopurine monotherapy is not recommended for induction of remission in adult outpatients with active moderate-to-severe UC. For maintenance of remission, thiopurine monotherapy is recommended over no treatment for adult outpatients with moderate-to-severe UC in remission.

"This guideline takes a comprehensive and evidence-based look at available therapies to provide the most trusted guidance to-date on treatment options to ultimately improve the care of patients with moderate-to-severe UC," Feuerstein said in a statement.

One author disclosed financial ties to the pharmaceutical industry.

More information: [Abstract/Full Text](#)

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