Vaccinations, especially when using immunosuppressant IBD medications, is one way you can keep yourself healthy and protect yourself from disease. While it is important to complete your vaccinations soon after being diagnosed with IBD, it is also important to remember to avoid “live vaccines” if you are taking immunosuppressant IBD medications, such as immunomodulators and biologics (examples including prednisone, Imuran®, methotrexate, Remicade®, Humira®, Cimzia®, Entyvio® and Stelara®).

While many vaccines are inactivated (not containing any live virus), live vaccines contain a version of the living microbe that has been weakened in the laboratory so it can’t cause disease in healthy individuals. In individuals who are immune-suppressed or taking immunosuppressive medication, these vaccinations have the potential to cause infection. Live vaccines should not be given while taking immunosuppressant drugs or within 2 months after stopping them. Common live vaccines include the Nasal Spray Flu Shot, Varicella (Shingles and Chicken Pox), MMR (Measles, Mumps, and Rubella), Rotavirus, and Oral Polio. Uncommon live vaccines, for military or travel to certain countries, include Smallpox, Yellow Fever, and Oral Typhoid. Inactive forms of vaccinations should be used whenever possible, such as receiving the flu shot injection over the nasal spray flu shot. Be sure to let your primary care physician know if you are taking immunosuppressant medication so they can decide the best course of action for vaccination.

Azathioprine (Imuran) and mercaptopurine (6-MP) have proven to be effective therapies in Crohn’s disease and ulcerative colitis. For this reason, patients with inflammatory bowel disease (IBD) are increasingly treated with these drugs. Which is all the more reason why we’re taking a moment to remind you how important it is, with the long-awaited spring and summer weather just around the corner, to use your sunscreen.

As a result of taking these medications you may be at an increased risk of non-melanoma skin cancers (NMSC). The most common NMSC’s are basal cell carcinoma and squamous cell carcinoma. Patients with IBD currently receiving or having previously received Imuran or 6-MP should protect their skin from UV radiation and receive regular dermatologic screening, regardless of their age.
Currently Enrolling Clinical Trials

**Ulcerative Colitis**

**Hickory—etrolizumab**
*Subcutaneous Injection*
This is a phase three study for patients with moderate to severely active Ulcerative Colitis to evaluate the safety and effectiveness of etrolizumab, which targets anti-integrin β7.

**Lilly—LY3074828**
*IV Induction / Subcutaneous injection for maintenance*
This is a phase two study for patients with moderate to severe Ulcerative Colitis to evaluate the safety and effectiveness of a new medication targeting interleukin-23.

**True North—ozanimod**
*Oral Tablet*
This is a phase three study for patients with moderate to severely active Ulcerative Colitis to evaluate the safety and effectiveness of ozanimod, which is an S1P1 activator.

**UNIFI—ustekinumab**
*IV Induction / Subcutaneous injection for maintenance*
This is a phase three study for patients with moderate to severe Ulcerative Colitis who have not taking any biologics previously.

**Bergamont—etrolizumab**
*Subcutaneous Injection*
This is a phase three study for patients with moderate to severely active Crohn’s disease to evaluate the safety and effectiveness of etrolizumab, which targets anti-integrin β7.

**PIONEER-CD**
*Medical Food Supplement*
This study is to evaluate the effectiveness of an orally administered medical food in moderately to severely active subjects receiving induction therapy for Remicade or Humira.

**Upstart—Lycera UC**
*Oral Tablet*
Max 2 previous Biologics. Must be currently on oral aminosalicylates (must be on for at least 6 weeks, with stable dose for at least 3 weeks) OR prednisone (<=20mg prednisone OR <=9 mg entocort)

**REVOLVE**
*Oral Tablet*
Phase III—52 weeks, placebo controlled double blind period. Maximum 3 previous biologics.

**APD371**
*Oral Tablet*
A new chemical entity for the treatment of abdominal pain due to IBD which includes Crohn’s disease. APD371 is an orally available, selective cannabinoid-2 (CB2) receptor agonist.

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**Crohn’s Disease**

**LUX—MEDI2070**
*Subcutaneous Injection*
This is a phase two study for patients with moderate to severely active Crohn’s disease to evaluate the safety and effectiveness of a new biologic medication targeting interleukin-23.

**Revolve**
*Oral Tablet*
Phase III—52 weeks, placebo controlled double blind period. Maximum 3 previous biologics.

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**Patient 2 Patient Education Project**

Refreshments & Lunch will be provided!

Limited seats available. RSVP at https://p2p.ep.eventbrite.com

Contact Kay Sauder with any questions! 734-647-2564 or ksauder@med.umich.edu

What: Together the CCSI & UofM IBD Program invite you to a FREE informational event for IBD patients and their friends/families

Where: PALMER COMMONS—100 Washtenaw Ave., Ann Arbor, MI 48109

When: Saturday, March 25th from 9am-2pm