

Pathway for adults with known uncomplicated  
Ulcerative Colitis who may be having a flare

Remember to inform the patient's IBD  
team that they are having a flare

**Exclusions: age under 16, have a  
stoma or fistula, have had surgery,  
or on biological therapy**

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These patients should have access to an  
IBD specialist – please contact their team  
before making any medication changes

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Ask about triggers. Check adherence to medication (consider once daily dosing for maintenance therapy). Stop NSAIDs, avoid opiates and seek advice for pain relief from the IBD team if needed. Consider self-care for functional symptoms once inflammation has been excluded. See [rcgp.org.uk/ibd](http://rcgp.org.uk/ibd) and signpost to [crohnsandcolitis.org.uk](http://crohnsandcolitis.org.uk).

Tests: stool culture (including Clostridium difficile testing), U&E, FBC, ESR/CRP, faecal calprotectin. Consider self-care for mild symptoms including dietary advice and reducing stress. Seek advice from the IBD helpline, IBD team or on-call gastroenterologist if results are significantly abnormal.

**Acute severe colitis:**

>6 bloody stools per day and systemic toxicity with at least one of:  
Visible blood in stool; Pyrexia (temperature greater than 37.8C); Pulse rate greater than 90bpm; Anaemia (Hb <105g/L); CRP >30mg/L

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Discuss with on-call  
gastroenterologist/  
medical team as  
may need admission

**Pancolitis or left-sided/extensive disease**

**Maximise oral 5-ASA (mesalazine):**

Pentasa 4g, Mezavant XL 4.8g, Octasa 4.8g, Asacol 4.8g, Salofalk 3g. Consider half maximum doses for patients who have mild disease and who are not currently taking an oral 5-ASA, or who are on a lower maintenance dose.

**Offer rectal therapy:**

especially if incomplete response to oral 5-ASA

Mesalazine Salofalk foam enema 2g nocte, Pentasa liquid enema 1g nocte, or Salofalk liquid enema

2g nocte. Consider locally acting oral agents if 5-ASAs not tolerated or not effective Oral Cortiment (Budesonide MMX) 9mg od for up to 8 weeks or Clipper (Beclamethasone) 5mg od for 28 days.

**Visit the NICE website for further info on doses:**

[bnf.nice.org.uk/drug/budesonide.html#indicationsAndDoses](http://bnf.nice.org.uk/drug/budesonide.html#indicationsAndDoses)

[bnf.nice.org.uk/drug/mesalazine.html#indicationsAndDoses](http://bnf.nice.org.uk/drug/mesalazine.html#indicationsAndDoses)

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**Proctitis:**

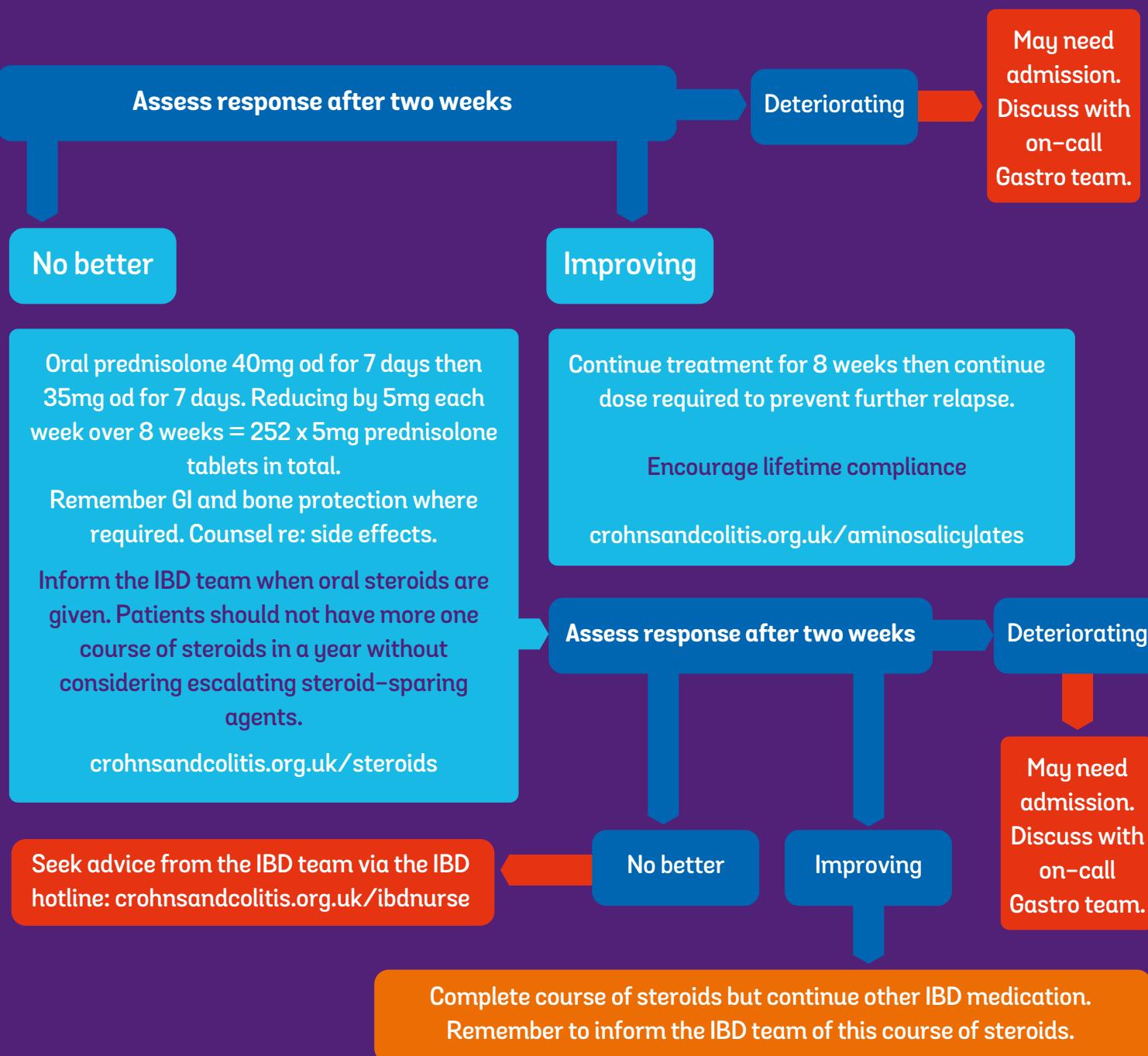
Mesalazine Salofalk suppository 1g nocte, Octasa 1g suppository nocte, Pentasa 1g suppository nocte

**Assess response  
after two weeks**



Please see page two

(continued flow from Pancolitis/extensive disease and proctitis or left sided disease pathways)



For more information on supporting patients with Crohn's or Colitis, see the RCGP and Crohn's & Colitis UK IBD toolkit:

[www.rcgp.org.uk/ibd](http://www.rcgp.org.uk/ibd)

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