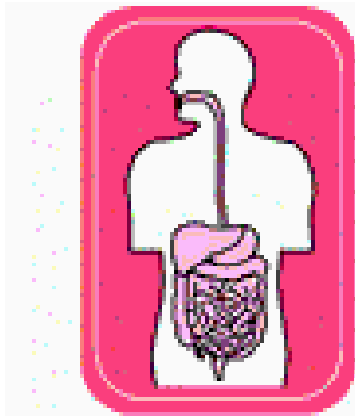


Mesalamine: (Asacol, Pentasa, Rowasa, Canasa, Colazal)

Description: Mesalamine (also called 5-ASA) is considered a topical treatment of Crohns Disease and Ulcerative Colitis... it acts locally at the site of inflammation. The mesalamine preparations act within the intestinal tract and work, "from the inside out". The **Asacol**, **Pentasa** and **Colazal** are taken by mouth; the **Rowasa** and **Canasa** is an enema or a suppository. The location of your disease (whether it is only in the colon or only in the small intestine or in both) determines which medication will be prescribed for you. With **Pentasa**, the granules are released in the small intestine and upper colon. With **Asacol**, the active ingredient is released at the very end of the small intestine and in the colon. **Colazal** is released in the large intestine. **Rowasa**, because it is given as an enema, or **Canasa** as a suppository, is used for rectal or lower colon involvement. Sometimes, a combination therapy (of oral and rectal preparations) is used.



What to Expect: Your doctor may have told you to gradually increase the dose of mesalamine over a period of several days. Your symptoms should begin to improve within a few days. We will be monitoring your progress and adjusting the medication according to your symptoms. During therapy with mesalamine products (**Asacol**, **Colazal** or **Pentasa**), you will have blood drawn on a fairly regular basis. Your complete blood count (CBC) will be monitored for signs of infection (the white blood count or WBC), and anemia (hemoglobin or Hgb). Because the drug is broken down by the liver and excreted by the kidney, chemistry studies, including liver function tests (LFT's) and kidney function tests will be done occasionally. If you are only on the enema/suppository preparation (**Rowasa**, **Canasa**), there is very little absorption of the drug; therefore there will be less lab work required.

Things to Know: For *oral* preparations: **Asacol** and **Colazal** tablets must be taken whole; do not chew or break or crush them. **Pentasa** capsules should not



be crushed, but the granules can be mixed with applesauce or pudding to make it easier to swallow. The mesalamine should be taken before meals and at bedtime with a full glass of water. Do not be alarmed if you see small beads or intact tablets in your bowel movements. This is because of the way the drugs are released in the intestine.

For *enema/suppository* use: the enema should be used at bedtime after the "last" bowel movement of the day and preferably held in the bowel overnight. The longer it is held, the more effective it is. The enema form of mesalamine can stain clothing and fabrics. The suppository can be used at night and as frequently as 3 times per day.

Side Effects: Some people develop a sudden onset of profound diarrhea and cramping (with or without fever, rash and headache) that occurs almost immediately after starting a mesalamine preparation. If this happens, you should contact us immediately. You may be unable to take this medicine. Other side effects that you should notify us of include yellow eyes and skin, chest pains, severe back or stomach pain, bloody diarrhea or sudden onset of nausea and vomiting. Gas (flatulence) may occur. Headaches can be avoided by gradually increasing the dose of mesalamine to the target dose.

Dosage:

Asacol is a 400mg tablet.



The usual dose is 1-3 tablets, 2-4

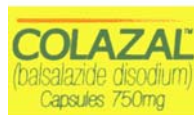
times per day.

Pentasa is a 250mg capsule.
2-4 times per day.



The usual dose is 2-4 capsules,

Colazal is a 750mg capsule.
day.



The usual dose is 3 tablets, 3 times per

Rowasa enemas come in 60cc (2oz) ready-to-use bottles. The usual dose is 1 enema every night or every other night. Mesalamine suppositories (generic available) are 500mg each and can be used once or twice per day.