Health Maintenance in Children with Inflammatory Bowel Disease

Yearly recommendations:

- **Influenza vaccine** or the “Flu shot”. A yearly influenza vaccine is recommended. Please note that only the injection contains the inactive virus and therefore, this is the acceptable form. Another form called the FluMist® (intranasal) is not an acceptable alternative since it is a live virus vaccine. This needs to be done by your primary care provider.

- **PPD** (tuberculosis test) done by your primary care provider. This needs to be performed upon diagnosis if not already completed within the last 12 months. A PPD should then be repeated yearly. The reason we request this test is that some medications used to treat IBD require a documented PPD result prior to initiation of therapy. Please obtain written documentation from your pediatrician of the results and have them faxed to us at (973) 290-7365 or bring to your next office visit.

- **Ophthalmology exam** is recommended yearly or once every 2 years as IBD can also result in inflammatory changes in the eyes that need to be monitored and may need more direct therapy.

- We recommend consulting with your primary care provider about vaccines. **Varicella** (Chickenpox) vaccine and a **Hepatitis B** vaccine series is recommended; the **Hepatitis A** vaccine series, although not required, is also recommended. For girls 12 and older, the human **papilloma virus** vaccine is also recommended.

**Medications** that are prescribed need to be taken as directed. The most common cause of a flare of IBD is inconsistent medication administration. Never stop a medication unless directed by the IBD team. Some medications, especially **steroids**, need to be tapered down gradually as abrupt stoppage could cause a severe reaction.

**Ibuprofen** (Advil/Motrin) vs. **Acetaminophen** (Tylenol®) for a child with IBD, Acetaminophen (Tylenol®) is the preferred over-the-counter agent for fever and pain relief. There is some theoretical concern that prolonged use of ibuprofen (eg Advil®, Motrin®) and other NSAIDs (eg Aleve®) may affect the underlying IBD. If however, there is a condition for which a physician feels ibuprofen or another NSAID is preferable, this can certainly be discussed with our IBD team. Similarly, with over-the-counter cold medications, please check the active ingredients on the package to see if acetaminophen or ibuprofen is listed. As stated above, acetaminophen is preferred.
**Refills:** we request you ask for them during an office visit. If you would like a 90-day prescription written for a mail-order company please be sure to let us know.

**Sunscreen:** Some of the medications used for IBD can sensitize the skin to the effects of the sun and even increase the life-time risk of skin cancers. Appropriate sunscreen (SPF 30 and greater) and limitation of sun exposure should be maintained.

**School:** All children should attend school and participate in all activities. If your child is not well enough to attend school, then he/she should be seen in our office.

**Labwork:** will be ordered to monitor your child's response to medications and to monitor the IBD. These tests are very important and should be performed on the schedule recommended. Please notify us whether your insurance requires you to go to Quest or LabCorp to avoid incurring an out-of-pocket expense.

**Join the Crohn's & Colitis Foundation of America (CCFA) [www.ccfa.org](http://www.ccfa.org)** CCFA is a non-profit organization that provides excellent information on IBD and can be a great resource to you. NJ Chapter of CCFA: 45 Wilson Ave. Manalapan, NJ 07726 (732) 786-9960.