## OL-RCT/ IFX vs Surgery/CD /QoL

Randomised, controlled, open label trial.

Patients with non-stricturing CD, active ileal disease, in which conventional therapy (AZA, MTX or steroids) has failed were randomized to either IFX vs Surgery.

- Excluded those with >40 cm ileal disease or abscess

Primary outcome: QoL at 12months (IBDQ)

<u>Secondary outomes</u>: general QoL (SF-36), morbidity, days on sick leave, days unable to have social life, body image...

Results: N: 143

- No differences in: QoL at 12 months, social life problems, hospital admission.
- Days on sick leave: 3.4 Qx vs 1.4IFX, p<0.0001
- SF-36 from 6 months onwards better in surgery group.

## **Conclusions:**

Laparoscopic resection in patients with limited (<40 cm) ileocaecal CD in whom convention therapy has failed, could be considered as a reasonable alternative to IFX.

## Laparoscopic ileocaecal resection versus infliximab for terminal ileitis in Crohn's disease: a randomised controlled, open-label, multicentre trial



