

Randomized-blind controlled trial.

Patients with active ulcerative colitis (left-sided or extensive) were randomized to oral prednisolone 5mg q.d.s (20 mg/day) vs nightly 100 mg hydrocortisone hemisuccinate sodium rectal drip or 40 mg rectal prednisolone 21-phosphate vs combined treatment (both oral and topical).

*Patients with recurrent attack were readmitted to the trial

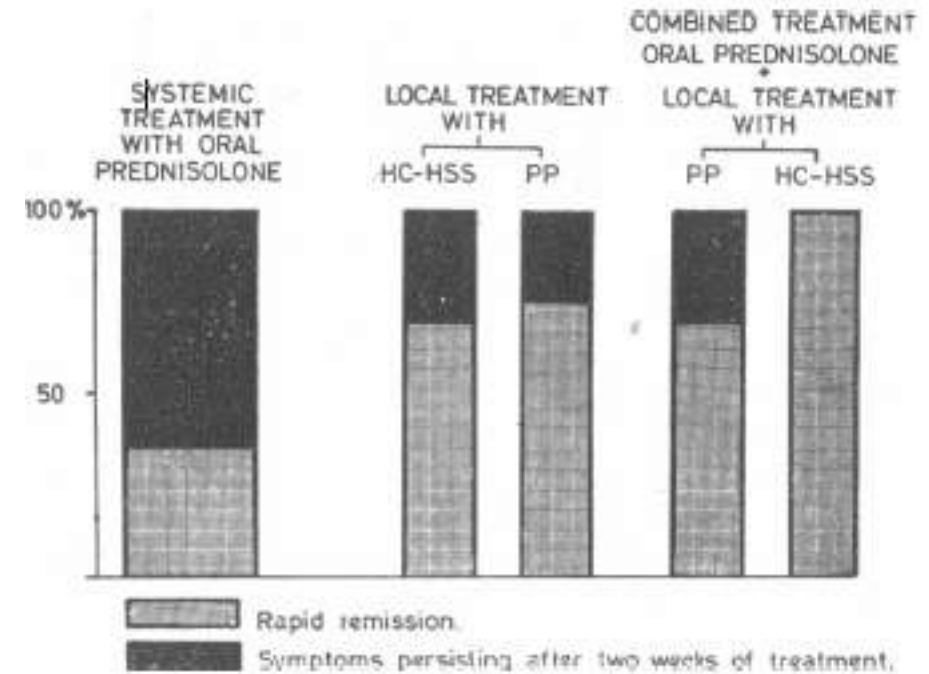
Primary endpoints: Clinical remission at week 2.

Results: N=105

- Clinical remission at week 2: oral prednisone 35% vs rectal hydrocortisone 70% vs rectal prednisone 21-phosphate 75% vs combined oral pred+rectal hydrocortisone 100% / oral pred+rectal prednisolone 70%.
- Both types of local treatment were significantly more rapid achieving remission than oral alone $p=0.01$.
- Combined treatment was better than local or oral alone $p=0.024$

Conclusion:

Topical use of corticosteroids within the colon proves to be better than oral corticosteroids alone to abort mild attacks of ulcerative colitis. For moderate attacks combination of oral and topical is better than either alone.



The different proportions of patients with rapid remission of symptoms according to the type of corticosteroid therapy. (HC-HSS=Hydrocortisone hemisuccinate sodium, PP=Prednisolone 21-phosphate.)

