

Randomized-controlled trial.

Patients with CD in clinical remission were randomized to: 7.5mg prednisone/day or pbo.

Patients were grouped into: 1) bowel resected CD with no residual active disease ; 2) CD with bowel surgery AND residual disease; 3) no surgery in the last 12 months. Surgeries done <3 months prior study Sulphasalazine continuation permitted.

Primary endpoints: Relapse occurrence at 18 months and at 3 years.

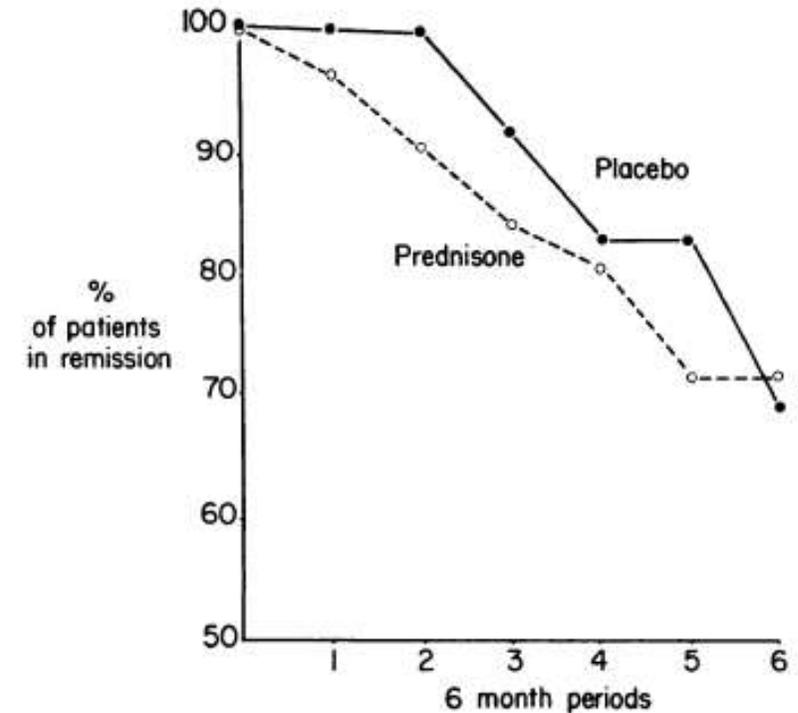
Results: N= 59

- Drug withdrawal at 3 years 30% for both arms due to active disease.
- At 3 years the percentage of patients with clinical relapse, postoperative recurrence or progression of disease extension was 45% in prednisone and 42% placebo.

Conclusion:

Long-term effect of low-dose prednisone in CD shows no benefit in the relapse rate, postoperative recurrence or disease progression.

Low dose steroids and clinical relapse in Crohn's disease: a controlled trial



(Calculated as life table estimate)

Figure The number of patients who remained in the trial during the three-year period is plotted as for a life table estimate for both the placebo and prednisone-treated groups.

