

Randomized double blind placebo controlled multicenter trial. Patients with mild to moderately active Crohn's disease of the small bowel alone or including colon were randomized to 1500mg/day slow-release 5ASA or placebo for 16 weeks. No other medication was allowed at least 2 weeks prior entering the trial.

Primary endpoints: Clinical improvement by CDAI at 16 weeks.

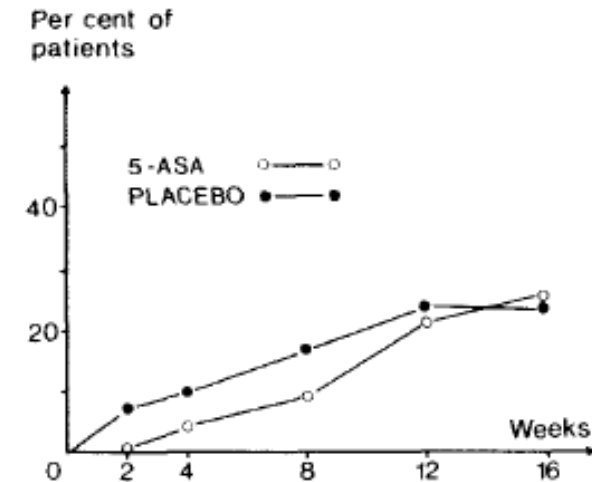
Results: N=67

- Improvement at week 16 occurred in 40% 5ASA and 30% placebo, $p > 0.2$
- There was no difference in drug survival up to 16 weeks between 5ASA and placebo.
- No differences were found between small bowel alone and small bowel and colonic involvement.

Conclusion:

5ASA at the dose used was not better than placebo in inducing clinical improvement in Crohn's disease

**5-Aminosalicylic Acid in the Treatment of Crohn's Disease.
A 16-Week Double-Blind, Placebo-Controlled, Multicentre Study
with Pentasa®**



5-ASA	n:	23	23	23	21	20	19
PLACEBO	n:	27	27	27	18	18	17

Fig. 2. Cumulative percentage of patients achieving >33% reduction in CDAI (of entrance score) and continuing below that value through treatment week 16 ($p > 0.5$).

