If your inflammatory bowel disease has not been well controlled with medication, your Gastroenterologist may suggest Adacolumn apheresis treatment.

**What is Adacolumn?**
Adacolumn is an established apheresis system that has been used widely in Europe and Japan for several years and more recently in the United Kingdom. It consists of a plastic tube that has small beads of cellulose acetate (type of plastic) inside it.

**What is Apheresis?**
Apheresis refers to the medical technique where blood is taken from the body and white blood cells are removed before the blood is returned.

**What disease is Adacolumn Apheresis treatment used for?**
Adacolumn apheresis treatment is used for people who have diseases affecting the immune system such as inflammatory bowel disease.

**How does it work?**
White blood cells known as leukocytes release a number of inflammatory substances that can cause inflammation of the lining of your gut and make you feel unwell.

As your blood passes through the Adacolumn, leukocytes (white blood cells) are selectively absorbed by the small beads of cellulose acetate. By reducing the number of leukocytes in the blood, Adacolumn protects against further tissue inflammation and associated symptoms that make you feel unwell.

**What does the treatment involve?**
Blood is drawn into the Adacolumn from a vein in one of your arms through a cannula or needle inserted into your vein. The blood is pumped slowly through the Adacolumn where some leukocytes are selectively absorbed.
After passing through the Adacolumn, blood is returned to you through a vein in your opposite arm.

**Are any drugs given with this procedure?**
A drug called heparin (which thins the blood) is given to you during the treatment. As blood is a thick substance this helps keep it slightly thinner during the treatment to avoid the Adacolumn becoming clogged up.

**How long will the treatment take?**
Apheresis treatment is usually done as an outpatient. Each treatment session lasts for about one hour. Your nurse will monitor your pulse and blood pressure before and after your treatment. If your treatment is to be different from this, the Gastroenterologist / Inflammatory Bowel Specialist Nurse will discuss this with you.

**How many treatments will I need?**
A typical treatment schedule would be one session a week for five weeks. Your Gastroenterologist will decide how many treatments you will need.

**What are the benefits of treatment with Adacolumn?**
- Several clinical studies with Adacolumn have shown the treatment to be effective in more than 40 - 50% of patients with inflammatory bowel disease.
- Not all patients respond to Adacolumn treatments, in others a delayed reaction is normal.
- Responses differ from patient to patient and the effects of the Adacolumn may not be apparent until a full course of treatment has been received.

**Are there any side effects with treatment?**
Current evidence suggests that there are no major safety concerns for the use of apheresis treatment in inflammatory bowel disease and a large Swedish study has shown very promising results. Common side effects that have been reported include headache, dizziness, flushing, palpitations, nausea and fatigue. Side effects are usually mild in nature. The system itself is also equipped with a number of built-in safety features.

**Are there any alternative treatments available?**
The only alternative is to continue with your usual medication.

**What will happen if I decide not to have this treatment?**
Your symptoms would continue.

**Should I continue to take my prescribed medication?**
You should continue taking your medication unless your Gastroenterologist / Inflammatory Bowel Specialist Nurse tells you otherwise.
How long do the benefits of Adacolumn last?
Clinical studies have shown that the positive results can continue for at least one year in some patients.

Are there any precautions?
Patients with a history of blood clotting problems, or who may be pregnant must inform their Gastroenterologist / Inflammatory Bowel Specialist Nurse before treatment. Patients taking ACE inhibitor drugs (medications for your blood pressure or heart) can have Adacolumn treatment but it must be given with caution due to an increased risk of low blood pressure. Adacolumn is not given to patients over 65 years or under 16 years.

When will I be allowed home?
- When your nurse is satisfied that you have completed the recovery stage and has discharged you
- You have been given information and your escort has arrived to take you home.

Will I have follow-up care after treatment?
You will continue to be followed up by your Inflammatory Bowel Specialist Nurse, who may need to monitor your blood results and stools to assess your response to Adacolumn treatment.

Where can I get further information about Adacolumn apheresis treatment?
If you have any questions about Adacolumn apheresis treatment, ask your Gastroenterologist or your Inflammatory Bowel Specialist Nurse.

Further information is also available from the National Institute of Clinical Excellence on the Internet at http://www.nice.org.uk/page.aspx?in=cy&o=242573

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This leaflet is available in large print, audio/computer disc, Braille, and other languages on request.