

## Azathioprine: a quick guide

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This is a summary of our information about azathioprine. Scan the QR code below for our full information about azathioprine. Or visit [www.crohnsandcolitis.org.uk/treatments](http://www.crohnsandcolitis.org.uk/treatments) for information about other treatments for Crohn's and Colitis.

Azathioprine (pronounced **ay-za-thy-oh-prin**) is also known by the brand name Imuran. You might also hear it called an immunosuppressant medicine or an immunomodulator.

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### Who is azathioprine for?

Azathioprine is used to treat Crohn's Disease and Ulcerative Colitis. Your doctor or IBD team might offer you azathioprine to keep your symptoms under control (in remission) and stop you having a flare-up. It may help you reduce or stop taking steroids.

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### How quickly does it work?

Everyone responds differently when taking a new medicine. It can take three months or more for azathioprine to start working. You might need to take other medicines, such as steroids, until azathioprine starts to work.

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### How do I take azathioprine

Azathioprine is a tablet. You can take it with a glass of water, with food or on an empty stomach. If azathioprine makes you feel sick, or gives you a tummy upset, try taking it after food or at bedtime.

Azathioprine should not be taken at the same time of day as any milk or dairy products.

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## How well does azathioprine work?

For many people, azathioprine works well to keep their Crohn's or Colitis under control. But it does not work well for everyone.

You may need to try several medicines before you find one that works for you.

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## How long will I take azathioprine for?

If azathioprine makes you feel better, you should be able to keep taking it for several years. You'll have regular blood tests to make sure it is still right for you.

If you don't have any flare-ups, your IBD team may suggest stopping treatment. Generally, after four years, you and your IBD team will decide whether to continue taking azathioprine. Some people continue to take azathioprine for many years.

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## Checks before starting azathioprine

Before you start treatment, your IBD team will check that azathioprine is right for you. They may ask you some questions and do some tests. This may include blood tests and X-rays. Tell your IBD team if you are pregnant, or you plan to get pregnant. They can help you make an informed decision about your care and your baby's safety.

Before you start azathioprine, you should have a blood test to check the level of thiopurine methyltransferase, known as TPMT, in your blood. TPMT is an enzyme that helps the body process azathioprine. Low levels of TPMT in your blood may mean that azathioprine will not be processed properly and stay in your body longer than it should. This can cause serious side effects. If you have low TPMT levels, the dose of azathioprine can be reduced. But if your TPMT levels are very low, azathioprine may not be right for you.

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## Checks while taking azathioprine

You will need to have regular blood tests while taking azathioprine. This includes tests to check your blood and how well your liver is working. When you start azathioprine, you will have blood tests every two weeks. After a while this will reduce to about every three months. How often you have blood tests will depend on the hospital that is treating you.



## Special precautions

Azathioprine affects the way your immune system works. You may be at a higher risk from infection than usual. You can still fight off infections, but not quite as well as other people. And it may take you longer to recover. But this should not stop you from living life as before. Find out how you can reduce the risk of infection by visiting [www.crohnsandcolitis.org.uk/immunosuppressants](http://www.crohnsandcolitis.org.uk/immunosuppressants).

## Side effects

All medicines can have unwanted effects, although not everyone will get them.

**Tell your IBD Team if you notice any side effects, or if you think you have an infection.**

The most common side effects with azathioprine are:

- Feeling sick or being sick. Taking azathioprine after eating or in two smaller doses each day may help reduce this.
- Flu-like symptoms such as a high temperature and general muscle aches and pains

More serious side effects include:

- Problems with your bone marrow, which affects your blood cells. This can make you feel weak, out of breath and tired. You may be more likely to get infections. And you can bruise or bleed more easily.
- Liver damage. You may notice your skin or eyes turning yellow.
- Pancreatitis. This is inflammation of the pancreas, a digestive gland in the tummy. This can cause very bad pain in your tummy.

Speak to your GP straight away if you notice any of these symptoms.

There is a slightly increased risk of some cancers for people treated with azathioprine. This includes skin cancers, cervical cancers and lymphoma, a cancer of the lymph glands. But this risk is very small.



## Taking other medicines

Azathioprine interacts with some other medicines. Before you take any new medicines check with your doctor, pharmacist or IBD team. This includes medicines that you buy yourself and any herbal, complementary, or alternative remedies.

Always tell anyone else treating you that you are taking azathioprine.

## Vaccinations

If possible, make sure that you are up-to-date with all of your vaccinations before you start treatment with azathioprine.

You should not have live vaccines while taking azathioprine. Live vaccines contain weakened live strains of viruses or bacteria. They can cause infection in people with a weakened immune system.

Everyone with Crohn's or Colitis taking azathioprine, should be invited to have the flu vaccine every year. You should also be invited to booster vaccines for COVID-19. You may be advised to have a pneumococcal vaccine and a shingles (Shingrix) vaccine. These are **not** live vaccines, and they are safe to have when you are taking azathioprine.

Your IBD nurse is .....

You can contact them on .....

Our Helpline is a confidential service providing information and support to anyone affected by Crohn's or Colitis. Call us on 0300 222 5700 or email [helpline@crohnsandcolitis.org](mailto:helpline@crohnsandcolitis.org).

We follow strict processes to make sure our information is based on up-to-date evidence and easy to understand. You can find out more at [www.crohnsandcolitis.org.uk/information-production](http://www.crohnsandcolitis.org.uk/information-production)

