

International IBD Genetics Consortium

PRED4

Sulphasalazine Induced Neutropaenia

Case Report Form

Study Code

Please stick study label here

On completion, please return to:
IBD Pharmacogenetics Research Office
The Research, Innovation, Learning and Development Centre (RILD)
Barrack Road
Exeter
EX2 5DW

Sulphasalazine Induced Neutropaenia

Introduction

Please complete all boxes where indicated and in black ball point pen.

If you make a mistake please put a line through the box, initial and date and write answer to the side.

Complete dates in format dd/mm/yyyy

The patient identification number is the bar code on the front of the CRF. Please transcribe this on to the top of the page in each relevant section.

For study inclusion participants must meet all the major criteria.

***Drug causes of neutropaenia**

- Antithyroid drugs (thionamides – Methimazole, Carbimazole, Propylthiouracil)
- Anti-inflammatory drugs (Nonsteroidal anti-inflammatory drugs [NSAIDs], Penicillamine, Gold, Hydroxychloroquine)
- Psychotropic drugs (Clozapine, Phenothiazines, Tricyclic and tetracyclic antidepressant)
- Gastrointestinal drugs (Sulfasalazine, Histamine H2- receptor antagonists)
- Cardiovascular drugs (Antiarrhythmic agents (tocainide, procainamide, flecainide), ACE inhibitors (enalapril, captopril), Propranolol, Dipyridamole, Digoxin)
- Dermatologic drugs (Dapsone, Isotretinoin)
- Antibacterial drugs (Macrolides including minocycline, Trimethoprim-sulfamethoxazole, Chloramphenicol, Sulfonamides, Vancomycin, Cephalosporin)
- Antimalarial drugs
- Antifungal agents (Amphotericin B, Flucytosine)
- Anticonvulsants (Carbamazepine, Phenytoin, Ethosuximide, Valproate, lamotrigine)
- Diuretics (Thiazides, Acetazolamide, Frusemide, Spironolactone)
- Chlorpropamide
- Bupropion
- Immunosuppressive drugs

Sulphasalazine Induced Neutropaenia

Section 1 - Inclusion Criteria

Study code

1.1 Major criteria (all must be met)

- History of inflammatory bowel disease or rheumatoid arthritis
- History of sulphasalazine exposure in the 30 days prior to developing neutropaenia
- Normal total white cell count and/or neutrophil count at baseline
- Fall in neutrophil count to $\leq 0.5 \times 10^9/L$
- Medical opinion implicating sulphasalazine leads to dose reduction or drug withdrawal (even if temporary)

1.2 Other risk factor(s) or potential causes for neutropaenia

- No
- Yes

If yes: Drugs, please specify (*see page 2)

Lab data suggestive of recent viral infection, e.g. CMV, EBV

If yes, please provide details

Myeloproliferative diseases

SLE

Hypersplenism

Other, please specify

1.3 Participant's eligibility

Is the participant eligible to take part in the clinical trial?

Yes

No

If no, please give reason(s) for screen failure:

1.
2.
3.

Investigator's name (print)

Date

dd / mm / yyyy

Sulphasalazine Induced Neutropaenia

Section 2 - Patient Details

Study code

2.1 Patient details

Date of Birth

dd / mm / yyyy

Sex: M

F

Weight at time of neutropaenia (or nearest estimate)

kg

Date of weight

dd / mm / yyyy

Height

cm

2.2 Ethnicity - Please tick as appropriate

White

- British
- Irish
- Any other White background

Black or Black British

- Caribbean
- African
- Any other Black background

Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed background

Chinese or Other Ethnic Group

- Chinese
- Any other ethnic group (*please specify*)
-
- Not stated

Asian or Asian background

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

2.3 Participant informed consent

Date participant signed written consent form

dd / mm / yyyy

Date of blood sample taken

dd / mm / yyyy

Name of person taking consent (print)

Designation

Sulphasalazine Induced Neutropaenia

Section 4a - Diagnosis & Classification of IBD Study code

Please fill the appropriate disease section (4a for individuals with IBD and 4b for individuals with rheumatological disorders). If the individual has both, please complete both section 4a and 4b.

4.1 Diagnosis and classification of IBD

<input type="checkbox"/> Crohn's disease	Date of diagnosis	<input type="text" value="dd / mm / yyyy"/>
<input type="checkbox"/> Ulcerative Colitis	Date of diagnosis	<input type="text" value="dd / mm / yyyy"/>
<input type="checkbox"/> IBD unclassified	Date of diagnosis	<input type="text" value="dd / mm / yyyy"/>

4.2 Ulcerative colitis

4.2.1 The extent of ulcerative colitis can be classified as:

- E1 Ulcerative proctitis - inflammation is limited to the rectum (proximal extent of inflammation is distal to the rectosigmoid junction)
- E2 Left sided UC (distal UC) - inflammation limited to a proportion of the colorectum up to the splenic flexure
- E3 Extensive UC (pancolitis) - inflammation extends beyond the splenic flexure
- Ex Unknown

4.2.2 Disease severity in 2 years prior to development of leucopaenia

- DS0 Clinical remission. Asymptomatic; no escalation of treatment
- DS1 Mild relapses – managed with oral or rectal aminosalicylates and/or rectal steroids: **no oral steroids** required
- DS2 Moderate relapses requiring oral steroids and/or addition of immunomodulator
- DS3 Severe or refractory disease requiring inpatient admission or colectomy

4.3 Crohn's disease

4.3.1 Location

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> L1 Ileal | <input type="checkbox"/> L3 Ileocolonic |
| <input type="checkbox"/> L2 Colonic | <input type="checkbox"/> L4 Isolated upper disease |

4.3.2 Behaviour - the behaviour can be defined by looking at reports from Barium enema, colonoscopy, MRI, CT

- | | |
|--|--|
| <input type="checkbox"/> B1 Non stricturing, non-penetrating | <input type="checkbox"/> B3 Internal penetrating |
| <input type="checkbox"/> B2 Stricturing | <input type="checkbox"/> p Perianal disease modifier |

Sulphasalazine Induced Neutropaenia

Section 4b - Diagnosis & Classification of Rheumatoid Arthritis/Seronegative Spondyloarthropathy

Study code

4.4 Rheumatoid Arthritis

Date of diagnosis

dd / mm / yyyy

4.4.1 Behaviour

Erosive Disease

Yes

No

Unknown

4.4.2 Type

Seropositive RA

Seronegative RA

Inflammatory polyarthritis

4.4.3 Antibody profile

ANA

Yes

No

Unknown

Rheumatoid factor

Yes

No

Unknown

Anti-CCP

Yes

No

Unknown

4.4.4 Extra-articular manifestations

Rheumatoid nodules

Cutaneous vasculitis

Pyoderma gangreosum

Raynaud's phenomenon

Interstitial lung disease

Pulmonary nodules

Pleural effusion

Pulmonary vasculitis

Scleritis

Pericarditis

Episcleritis

Mononeurritis multiplex

Keratitis

Felty's syndrome

4.5 Seronegative Spondyloarthropathy

(please select on or more of the following diagnoses)

Psoriatic arthritis

Ankylosing spondylitis

Enteropathic arthritis

Reactive arthritis

Undifferentiated spondyloarthropathy

Date of diagnosis

dd / mm / yyyy

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Section 5 - Neutropaenia History

Study code

5.1 Date sulphasalazine first commenced

dd / mm / yyyy

5.2 Maximum dose of sulphasalazine in 1 month prior to episode of neutropaenia

5.2.1 Date when this maximum dose of sulphasalazine started

dd / mm / yyyy

5.3 Presentation

Did the patient present because of:

- Routine monitoring Sepsis
 Opportunistic blood test Unknown
 Other

5.4 Neutropaenia

	Date	Total white cell count	Neutrophil count	Haemoglobin	Platelet count
Normal range for lab	dd/mm/yyyy				
Baseline (last blood test prior to commencing sulphasalazine)	dd/mm/yyyy				
First blood test showing neutropaenia (below normal range for your lab)	dd/mm/yyyy				
Blood test demonstrating lowest total neutrophil count	dd/mm/yyyy				
First recovered neutrophil count (within normal range)	dd/mm/yyyy				

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Section 5 - Neutropaenia History

Study code

5.5 Action taken

- Dose decreased Date
Reduced dose
 Tolerated (normal ALT/bilirubin on the dose) Not tolerated Not known
 Drug withdrawn Date

5.6 Did the patient require hospital admission at any stage due to neutropaenia?

- Yes No Unknown

If yes, date of admission

Date of discharge

Details

5.7 Complications

Any infections during the neutropaenic episode? Yes No

If yes, please give details (infective condition, organism)

5.8 Was the individual ever re-challenged with sulphasalazine?

- Yes No Unknown

Outcome:

Tolerated Dose tolerated

Not tolerated Adverse reaction

Date of drug withdrawal

5.9 Was a bone marrow biopsy done?

- Yes No Unknown

If yes, please give results

5.10 Was the patient ever treated with G-CSF?

- Yes No Unknown

If yes, what was the start date?

What was the end date?

Did the patient respond?

Did the patient receive any other treatment for neutropaenia?

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Section 8 - Principal Investigator Statement

Study code

I have reviewed this CRF and confirm that, to the best of my knowledge, it accurately reflects the study information obtained for this participant. All entries were made either by myself or by a person under my supervision who has signed the Delegation and Signature Log.

Principal Investigator's signature

Date

Principal Investigator's name (print)

ONCE SIGNED, NO FURTHER CHANGES CAN BE MADE TO THIS CRF WITHOUT A SIGNED DATA QUERY FORM