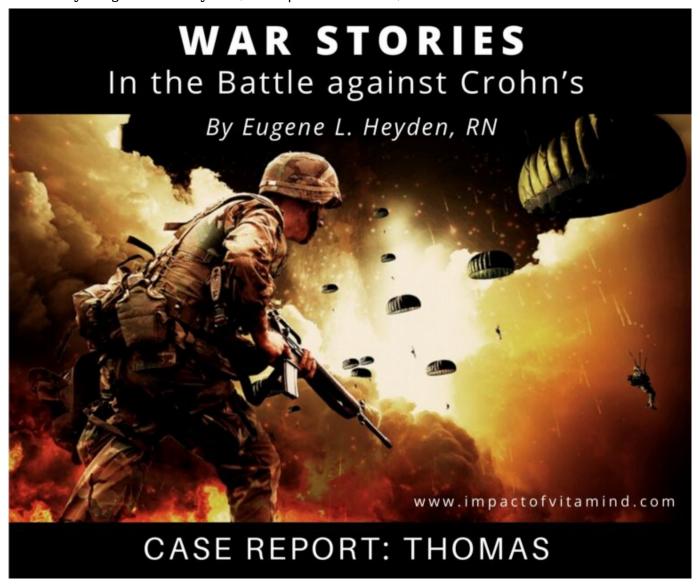
# War Stories: Thomas

written by Eugene L. Heyden, RN. | December 7, 2022



## By Eugene L. Heyden, RN

"Isolated reports of remission during bupropion treatment of TNF mediated illnesses, such as recurrent oral aphthous ulceration and Crohn's disease have appeared and bupropions use has been suggested in these and some cancers, such as multiple myeloma and chronic lymphocytic leukemia, where TNF is believed to play prominent pathogenic roles." ~Foley et al., 2006

Bupropion, also known as Wellbutrin, is a drug typically prescribed for depression, and has a nifty little trick up its sleeve, making it suitable for other applications. It can increase intracellular levels of a protein called cAMP, leading to decreases in the production of TNF- $\alpha$  (Kast and Altschuler, 2001). Notably, TNF- $\alpha$  is one of the principal cytokines that coordinate and drive the inflammation we see in IBD, so interfering with its production may allow remission to occur. There is a precedent for targeting TNF- $\alpha$  in the battle against Crohn's and ulcerative colitis. Move over Remicade, bupropion is ready to serve.

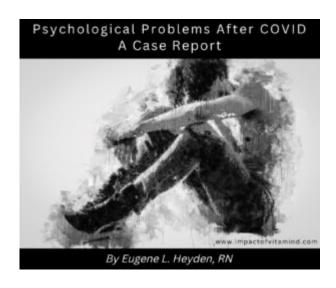
### **Case report: Thomas**

It sounds as though Thomas has been through the mill. At age 45, his twenty-year history of Crohn's included 4 resections of his small bowel. And recently, although on azathioprine (Imuran), Thomas experienced another disease flare which led to yet another bowel resection. When the dust settled, his CDAI was calculated at approximately 275, which would place his disease activity in the moderately active range.

Somewhere along the line, Thomas was placed on fluroxetine (Prozac) for pain control, but this turned out to be ineffective. He was then placed on bupropion (Wellbutrin), which made him feel better, and which was continued by his primary physician. Although the report did not specify the length of time involved, my guess is that within weeks to months Thomas achieved remission.

"Currently, the patient is taking bupropion 150 mg three times daily. **His Crohn's** symptoms have alleviated completely, and his CDAI is about 45 as a result of 3-4 diarrheas a day, possibly secondary to no longer having an ileal-cecal valve. He has had no CD flares or associated surgeries since starting bupropion. Under his doctor's supervision, he has recently tapered his azathioprine from 100 to 50 mg every day without any increase in CDAI." (Kast and Altschuler, 2001, emphasis added)

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#### **References:**

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