



Sulfasalazine Shortage

Suppliers of sulfasalazine tablets in Canada.¹

DIN	Manufacturer	Brand name	Strength
Regular Release Tabs			
00598461	Pharmascience	PMS-Sulfasalazine	500 mg
02064480	Pfizer	Salazopyrin	500 mg
Delayed Release Tabs			
00598488	Pharmascience	PMS-Sulfasalazine E.C.	500 mg
02064472	Pfizer	Salazopyrin EN-tabs	500 mg

Indications for regular release tablets²:

- adjunctive therapy of severe ulcerative colitis, proctitis, distal ulcerative colitis, and Crohn's disease

Indications for delayed release tablets²:

- active rheumatoid arthritis (RA)
- patients experiencing gastrointestinal adverse reactions from the regular tablets*

Sulfasalazine trials for RA used only delayed release tablets, thus regular release tablets are not indicated for RA.⁵ However, no data has been found to suggest sulfasalazine regular tablets would be ineffective for RA. Gastrointestinal adverse effects can be expected to increase when switching to regular release tablets.^{2,4}

In the event Salazopyrin[®] regular tablets also become unavailable:

- Bulk sulfasalazine powder is available for compounding⁵
- Patients with **acute or maintenance ulcerative colitis** can be switched to^{4,6}:
 - 5-ASA (mesalamine) – the active moiety of sulfasalazine; often better tolerated though more expensive⁶
 - Olsalazine – like sulfasalazine is converted to 5-ASA by colonic bacteria⁸
- Note: sulfasalazine is effective for acute therapy of mild Crohn's Disease (CD);^{4,6} role of 5-ASA is controversial.⁶ Patients with **mild acute CD** may need to be switched to:
 - Oral budesonide (ileo and right colonic only) or prednisone^{4,6}
- Appropriate treatment of patients with **RA** depends on previous history^{8,9}:
 - Sometimes sulfasalazine is considered early in treatment; therefore, depending on history, DMARDs like hydroxychloroquine, leflunomide, or even methotrexate may be viable options.⁹
 - However, sulfasalazine is more typically added as a third DMARD; as such, a switch to biologics may need to be considered.^{8,9}

*Not an official indication but information is included in the monograph.

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References:

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