

IBD

DISCUSSION GUIDE

This guide can help you and your doctor see how inflammatory bowel disease (IBD) is affecting you, and if you could be doing more to manage your IBD. Fill out this document and bring it with you to your next appointment.



TIP The best way to cope with IBD is to seek effective treatment. Work with your doctor to create a treatment plan that's right for you. If you're not satisfied with your current treatment, talk to your doctor about other options.

Share the following information with your doctor:

1. BOWEL MOVEMENTS

During the past month, I had the following average number of soft or loose bowel movements per day: (Note: It may be helpful to keep a daily diary of these symptoms.)

- 0 3 – 5 10 – 12
 1 – 2 7 – 9 More than 12

2. ABDOMINAL PAIN

Over the past month, I would rate the severity of my abdominal pain as: (Note: It may be helpful to keep a daily diary of your abdominal pain.)

1	2	3	4	5	6	7	8	9	10
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3. DISEASE FLARES

I've experienced the following average number of disease flares over the past year: (Note: A disease flare is a period of symptom activity and can include abdominal pain, stool changes, urgency, loss of appetite, among other symptoms.)

- 0 3 – 5 10 – 12
 1 – 2 7 – 9 More than 12

4. CHALLENGES

Since my last visit, my IBD has caused me to:

- | | | | |
|--|---------------------------------|--------------------------------|------------------------------------|
| <input type="checkbox"/> Skip meals: | <input type="checkbox"/> Always | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes |
| <input type="checkbox"/> Decline social engagements: | <input type="checkbox"/> Always | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes |
| <input type="checkbox"/> Avoid activities I enjoy: | <input type="checkbox"/> Always | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes |
| <input type="checkbox"/> Arrive late for an event/leave early: | <input type="checkbox"/> Always | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes |
| <input type="checkbox"/> Miss work/school: | <input type="checkbox"/> Always | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes |
| <input type="checkbox"/> Lose sleep: | <input type="checkbox"/> Always | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes |
| <input type="checkbox"/> Stay in bed for all or most of the day: | <input type="checkbox"/> Always | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes |
| <input type="checkbox"/> Other <input type="text"/> | <input type="checkbox"/> Always | <input type="checkbox"/> Often | <input type="checkbox"/> Sometimes |

ABOUT CCFA

Established in 1967, the Crohn's & Colitis Foundation of America (CCFA) is a nonprofit, volunteer-driven organization whose mission is to cure Crohn's disease and ulcerative colitis, and to improve the quality of life of children and adults affected by these diseases.

Contact the Crohn's & Colitis Foundation of America's IBD Help Center to access:

Additional tips and resources to help you manage IBD



Disease trackers (online, print and mobile app)



Disease information



Guidance



Support



5. EMOTIONS

Since my last visit, my IBD has made me feel:

- Isolated
- Stressed
- Depressed
- Helpless
- Overwhelmed
- Angry
- Sad
- Embarrassed
- Anxious
- Frustrated
- Guilty
- Other
- None of the above

6. APPETITE/BODY WEIGHT

I've experienced the following changes in appetite, diet or body weight over the past 6 months:

- Appetite:**
- Increased
 - Decreased
 - Stayed the Same

- Weight:**
- Increased
 - Decreased
 - Stayed the Same

If your weight changed, how many pounds was the increase or decrease?
 lbs

7. COMPLICATIONS

I've experienced the following complications over the past month:

- Joint pain
- Eye issues
- Kidney issues
- Skin issues
- Liver issues
- Other

8. IMPROVEMENTS

Since starting my current treatment, my disease symptoms have:

- Improved.
How have they improved:
- Become worse.
How have they become worse:

Stayed the same.



Sample questions to ask your doctor:

- 1**
Which treatment options may be right for me?
- 2**
What are the benefits and risks/side effects of these options?
- 3**
How long might it take before I see an improvement in symptoms?
- 4**
What can I do to ensure I'm getting the most from my medication?
- 5**
What else can I do, in addition to taking my medication, to effectively manage my IBD?

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