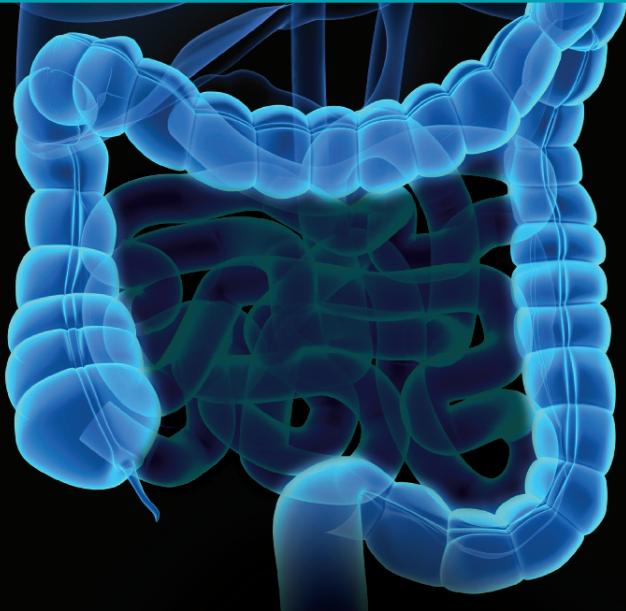


PLEASE JOIN US FOR A FRIDAY LUNCHEON SYMPOSIUM



KEYS TO PERSONALIZED UC MANAGEMENT

FRIDAY • DECEMBER 7, 2007

The Fairmont Turnberry Isle

GARDEN ROOM

Program Chair

STEPHEN B. HANAUER, MD

Program Faculty

SUNANDA V. KANE, MD, MSPH

DANIEL H. PRESENT, MD

DAVID T. RUBIN, MD

Agenda

REGISTRATION AND LUNCHEON SEATING

12:20 PM – 12:30 PM

LUNCHEON SYMPOSIUM

12:30 PM – 1:45 PM

Jointly sponsored by

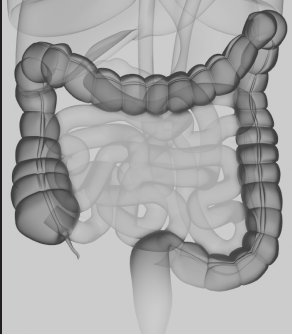


The University of Chicago
Pritzker School of Medicine



This activity is made possible by an independent educational grant from Procter & Gamble Pharmaceuticals, Inc.





KEYS TO PERSONALIZED UC MANAGEMENT

Needs Assessment

Ulcerative colitis (UC) is a chronic disease characterized by diffuse mucosal inflammation limited to the colon. Affecting approximately 500,000 individuals in the United States, UC can be debilitating for patients and cause significant impairment in quality of life. Ulcerative colitis can present a number of diagnostic and management challenges for the practicing physician as well. Because the approach to therapy is determined by the extent and severity of disease, effective management of the patient with UC relies on appropriate patient evaluation. Although evidence-based information from controlled trials continues to refine optimal diagnostic and treatment strategies for UC, it is important to understand how the various clinical trial designs and endpoints relate to the evaluation and management of UC patients in clinical practice.

Treatment goals for UC are sequentially directed at inducing and then maintaining remission of symptoms. Despite the introduction of newer agents, the 5-aminosalicylic acid (5-ASA) agents remain the cornerstone of therapy for patients with mild to moderate disease. Numerous 5-ASA agents are available in a variety of formulations and delivery systems. Although they share a similar mechanism of action, there may be some clinically relevant differences among the various 5-ASA formulations. However, the benefits of therapy with 5-ASAs, or any pharmacologic agent, will be achieved only if patients are adherent and follow prescribed treatment regimens reasonably closely. Thus, clinicians managing UC patients should incorporate strategies for improving adherence as an integral part of the overall management plan. In particular, clinicians should realize the importance of communication, patient education, and individualizing therapy to each patient's needs and lifestyle in order to maximize adherence and treatment benefits.

Drawing on research and clinical experience, the faculty will address and clarify issues regarding the evaluation and management of UC, the practical relevance of UC clinical trials, and strategies for improving patient adherence with UC therapies. This program is designed to help clinicians develop optimal management strategies through the use of presentation and an interactive question-and-answer period.

Educational Objectives

At the conclusion of this symposium, participants should be able to:

- Discuss how to evaluate ulcerative colitis patients with respect to disease severity, extent, and symptoms
- Explain how various clinical trial designs, endpoints, and activity indices used in ulcerative colitis research relate to practical patient evaluation
- Describe the similarities and differences among the various 5-ASA formulations available for use in UC patients
- Identify strategies for improving treatment adherence in the overall management plan of UC patients

Accreditation

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint sponsorship of the University of Chicago Pritzker School of Medicine and IMED Communications. The University of Chicago Pritzker School of Medicine is accredited by ACCME to provide continuing medical education for physicians.

Credit Designation

The University of Chicago Pritzker School of Medicine designates this educational activity for a maximum of 1.25 *AMA PRA Category 1 Credits*[™]. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Disclosure Statement

All faculty participating in CME activities sponsored by the University of Chicago Pritzker School of Medicine are expected to disclose to the activity audience any real or apparent conflict(s) of interest related to the content of their presentations(s). Complete faculty disclosure statements will be provided at the beginning of the symposium.