Doctors have potentially found a cure of Crohn’s disease.

Professor Tom Borody

What if a common incurable and debilitating inflammatory bowel disease that destroys lives and often leads to surgery and removal of the bowel, was caused by a bacteria? Bacteria that could be treated with just antibiotics.
This is what doctors are investigating now across Australia and New Zealand as part of a global clinical trial, and if the hypothesis is right it will revolutionise treatment of Crohn’s Disease.
Crohn’s currently affects about 50,000 people in Australia and is on the increase – especially among young people. Patients can become house-bound, lose their jobs and social networks, and they suffer a domino effect of other serious health issues.
We are treating patients with Crohn’s Disease using a novel approach of antibiotics designed to attack the underlying infection which we believe causes the disease. Instead of treating inflammation, we’re treating an infection which is causing the inflammation.
Patients can become house-bound, lose their jobs and social networks. Professor Tom Borody, image supplied.

This is potentially as revolutionary as the discovery in 1984 that Peptic Ulcers were caused by a bacteria rather than stress or acid, so they could be cured with antibiotics.

The bacteria suspected of causing Crohn’s Disease is *Mycobacterium avium* subspecies *paratuberculosis* (MAP). Until now the only treatment for Crohn’s has been anti-inflammatory drugs or surgery. The global clinical trial to test this for TGA/FDA approval has just launched in Australia and New Zealand and is open to only 270 participants. Potential candidates include men and women 18 -75 years old with Crohn’s disease diagnosed more than six months ago, and are currently experiencing a “flare-up”.

To put it simply, we believe when the body attempts to kill off the MAP bugs it causes collateral damage resulting in inflammation, seen also in other situations when the body tries to repair or fight a disease or injury.
BEFORE: Red, swollen mucosa, pus, mucus, bleeding and inflammatory. Image supplied.

AFTER: "We have found the inflammation settles down." Image supplied.

So what do we see when we do a colonoscopy. Red, swollen mucosa, pus, mucus, bleeding, inflammatory polyps, deep ulcers, and occasionally fistulae. It’s an awful disease which can progressively worsen and you cannot cure it simply by surgically removing affected sections of the bowel. While this combination antibiotic treatment is a new approach for the medical community, we have actually treated more than 460 patients with success at The Centre for Digestive Diseases (CDD) in Sydney over the past 20 years. We worked with different 'mixes' of the antibiotics, until we found a system that seems to put most people into remission. Then refined the antibiotic therapy into a single capsule. We have found the inflammation settles down and you can get quite dramatic healing.

To find out more about participating in this Study please visit www.MapMyCrohns.com

Participants will get specialist medical check-ups, advanced monitoring tests, and study medication at no charge.

Prof. Borody has over 200 articles and abstracts. His knowledge and expertise has been sought after by patients from around the world. The results have seen Prof. Borody become a reviewer for esteemed medical journals such as the Medical Journal of Australia, the American Journal of Gastroenterology, Journal of Gastroenterology and Hepatology, Digestive and Liver Diseases, J Clinical Gastroenterology and others.

Prof. Borody has established novel therapies in gastrointestinal areas such as Inflammatory Bowel Disease, Irritable Bowel Syndrome, Parasite infestation, Resistant Helicobacter pylori and C. difficile.