



Budesonide

Information for people with inflammatory bowel disease

PE-IBD-06

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Budesonide is a steroid designed to act mainly inside the bowel. Most of what is absorbed is removed by the liver before it reaches the rest of the body, so it causes fewer steroid side effects than prednisolone – though not none.

Why you are taking it

Budesonide is used to settle mild to moderate flares. One form (Entocort or Budenofalk) releases the drug in the last part of the small bowel and the right side of the colon, and is used for Crohn's disease in that area. A different form (Cortiment MMX) releases it along the colon and is used for mild to moderate ulcerative colitis when mesalazine alone is not enough. The two are not interchangeable – take the one prescribed for you. Budesonide is less effective than prednisolone, and it does not work for Crohn's disease elsewhere in the gut.

How to take it

The usual dose is 9 mg once daily in the morning. Swallow the capsules or tablets whole with water; do not open, crush or chew them, as this destroys the coating that delivers the drug to the right part of the bowel. Avoid grapefruit juice, which raises the level of the drug in the blood. A course usually lasts up to eight weeks, and the dose is then reduced over the last two to four weeks rather than stopped abruptly.

How long it takes to work

Improvement is usually seen within two to four weeks. We review you at about four weeks; if there has been no response by then, budesonide is unlikely to work and we will change treatment.

Blood tests and monitoring

Budesonide does not need routine blood monitoring. We check your response, and check blood pressure and blood glucose if you have diabetes, high blood pressure or glaucoma. After a long or repeated course we may check that your own steroid production has recovered.

Side effects

Side effect	What it means and what to do
Headache, nausea, indigestion	Common and usually mild.
Increased appetite, mood change, sleep disturbance	Less common than with prednisolone, but they do occur.
Acne, round face, easy bruising	Uncommon at 9 mg for eight weeks; more likely with repeated courses.
Infection	As with any steroid, report fever or signs of infection early.
Suppression of your own steroid production	Possible after prolonged or repeated use, which is why a long course is tapered rather than stopped abruptly.

Important precautions

- Budesonide is a steroid. Tell any doctor, dentist or pharmacist that you are taking it.
- Do not stop a course lasting more than a few weeks without the reducing plan we give you.
- It is not a maintenance treatment – it is not used to keep Crohn's disease in remission.
- Tell your doctor if you have liver disease, as levels in the blood can be higher.
- Avoid anti-inflammatory painkillers such as ibuprofen and diclofenac.
- For a repeat prescription, message the clinic. If there is no reply after 48 hours send the message again, and if there is still no reply, come to the clinic.

Pregnancy and breastfeeding

Budesonide can be used in pregnancy and breastfeeding when needed. Tell your doctor if you are pregnant or planning to be, so they can review whether budesonide is still the right choice or a maintenance medicine is needed.

Tell your doctor straight away if

- You have a fever or any sign of infection.
- Your symptoms are worse, or no better after two to four weeks.
- You have severe abdominal pain or black or bloody stools.
- You develop blurred vision or eye pain.
- You feel faint, very weak or unwell after stopping a long course.

Tell your doctor so they know and can bring your appointment forward. But if you feel seriously unwell, go to the Emergency Department first – do not wait for a reply.

Contact your doctor using the numbers your clinic has given you. If you are seriously unwell, or it is outside working hours, go to the Emergency Department rather than waiting for a reply. Brand names and preparations may differ – check the label on your own medicine. General safety advice is in sheet [PE-IBD-04](#). Version 1.0 · review date October 2028.

This leaflet is general information and does not replace advice from your own doctor.

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