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**Systematic Review**

**Title: Review: Management of Inflammatory Bowel Disease with Clostridium Difficile Infection**

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**1 What did this study explore?**

This review explores the negative impact of C. difficile infection (CDI) on patients with inflammatory bowel disease. Specifically, this study outlines the existing safety and efficacy evidence of IBD therapeutics in those people with concomitant CDI.

**2 How did the authors perform all experiments?**

A systematic search of Ovid MEDLINE and EMBASE databases was performed to identify articles relating to IBD patients with CDI published between 1946 and January 2017.

**3 How did the authors process all experimental data?**

Once relevant articles were identified using pre-determined inclusion and exclusion criteria, incidence, risk factor, diagnosis, management and outcome data was extracted manually using individual forms.

**4 How did the authors deal with the pre-study hypothesis?**

There is a dearth of prospective studies evaluating the therapy for IBD in those who have been diagnosed with CDI and current guidelines do not pronounce themselves strongly on the topic. However, based on our experience in clinical practice, it was our pre-study hypothesis that initiation of immunosuppressive therapies in an IBD flare with CDI was likely warranted after a period of appropriate CDI treatment.

**5 What are the novel findings of this study?**

To our knowledge, this is the first systematic review to discuss IBD specific therapy in the setting of C. Difficile infection. Vancomycin-containing regimens should be used as first-line therapies for CDI in IBD. Prospective studies are required to better determine when IBD specific therapy can be safely and effectively initiated in those with CDI, however, case reports suggest corticosteroid initiation after appropriate antibiotic therapy may be safe and effective.

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