Ulcerative Colitis/Crohn’s Disease

Colitis, by definition, means inflammation of the colon wall. It usually refers to inflammatory bowel disease like ulcerative colitis and Crohn’s disease, but other forms of colitis are infectious gastroenteritis and ischemic colitis (vascular disease affecting the arteries that supply the intestines). The term “colitis” is sometimes used more broadly to include colon spasm or irritable bowel syndrome, but these are not true colitis.

**Ulcerative colitis** is a recurrent inflammation of the colorectum. It is characterized by bloody diarrhea, abdominal pain, fever, anemia and weakness. It usually develops between the ages of 25 - 45 and 10 - 15% of cases have a family history of this disease. Inflammation limited to the rectum (ulcerative proctitis) is a more mild form of the disease when compared to inflammation of the entire colon. Those with ulcerative colitis have a higher incidence of colon cancer, especially if the disease has been present for more than 10 years. Regular checkups with colonoscopy are important. Treatment may include anti-diarrheal agents, sulfasalazine, corticosteroids, immunosuppressive agents, or surgery. A total colectomy (removal of entire colon with or without colostomy) is curative.

Underwriting considerations for unoperated ulcerative colitis:

<table>
<thead>
<tr>
<th>Time since diagnosis</th>
<th>AGE AT TIME OF APPLICATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age &lt; 45</td>
<td>Age 45 and over</td>
</tr>
<tr>
<td>&lt; 1 year of diagnosis</td>
<td>Postpone</td>
</tr>
<tr>
<td>1 - 4 years</td>
<td>Table F</td>
</tr>
<tr>
<td>5 years and over</td>
<td>Table B</td>
</tr>
</tbody>
</table>

If a total colectomy was been done and there were no complications, standard consideration is possible after a 6 month postponement from surgery. Complications may include repeated surgery, weight loss, or other system involvement (such as sclerosing cholangitis) and lead to a higher rating or a decline depending on the severity of the complication. Surgery other than a total colectomy will be viewed by the unoperated schedule above.
Underwriting considerations for ulcerative proctitis:

<table>
<thead>
<tr>
<th>Within one year of diagnosis</th>
<th>Table B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thereafter</td>
<td>Nonrated</td>
</tr>
</tbody>
</table>

**Crohn's disease** is sometimes called regional enteritis. There may be inflammation of any part of the gastrointestinal tract from mouth to anus. Commonly affected areas are the terminal ileum, colon and anorectal region. Clinical features include chronic diarrhea, abdominal pain, fever, anorexia and weight loss. Crohn’s disease is most often diagnosed between the ages of 20 - 40. There is an increased risk of colon cancer if the disease has been present over 15 years. Treatment is similar to that of ulcerative colitis. However, over half of Crohn’s patients will need some surgical intervention within 5 years. Because the entire gastrointestinal tract can be involved, surgery is not curative and recurrences following surgery are common.

Underwriting considerations for Crohn’s Disease:

<table>
<thead>
<tr>
<th>AGE AT TIME OF APPLICATION</th>
<th>TIME SINCE DIAGNOSIS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age &lt; 45</td>
<td>≤ 1st year of diagnosis</td>
</tr>
<tr>
<td>Age 45 and over</td>
<td>1 - 4 years</td>
</tr>
<tr>
<td></td>
<td>5 - 10 years</td>
</tr>
<tr>
<td></td>
<td>after 10 years</td>
</tr>
</tbody>
</table>

Crohn’s disease requiring daily steroid use requires addition of one table to above ratings. Crohn’s disease with frequent flares or with disabling diarrhea is rated Class F to decline irrespective of age. Continuous debilitating symptoms despite medication (including repeated hospitalization and/or surgery, weight loss and intravenous hyperalimentation/I.V. nutrition) would be a decline.

To get an idea of how a client with a history of ulcerative colitis/Crohn’s disease would be viewed in the underwriting process, feel free to use the Ask “Rx” pert underwriter on the reverse side for an informal quote.
Ulcerative Colitis/Crohn’s Disease - Ask "Rx" pert underwriter  
(ask our experts)

Producer _______________________ Phone _______________ FAX _______________
Client _________________________ Age/DOB _______________ Sex _______________

If your client has a history of Ulcerative Colitis or Crohn’s disease, please answer the following:

① Please list date of first diagnosis: ________________________________

② Please note the type of inflammatory bowel disease present:
   ✑ Chronic Ulcerative Colitis
   ✑ Chronic Proctitis (inflammation in rectum only)
   ✑ Crohn’s disease

③ Is your client on any medications?
   ✑ yes, please give details ________________________________
   ✑ no

④ Please check if your client has had:
   ✑ hospitalizations for this disorder (list dates) ________________________________
   ✑ surgery for this disorder (list dates) ________________________________
   ✑ colonoscopy (list dates of most recent) ________________________________

⑤ Please note client’s build:
   Height ____________________  Weight ____________________

⑥ Has your client smoked cigarettes in the last 12 months?
   ✑ yes
   ✑ no

⑦ Does your client have any other major health problems? (ex: heart disease, etc.)
   ✑ yes, please give details ________________________________
   ✑ no

After reading the Rx for Success on “Ulcerative Colitis/Crohn's Disease”, please feel free to use this Ask “Rx” pert underwriter for an informal quote.

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