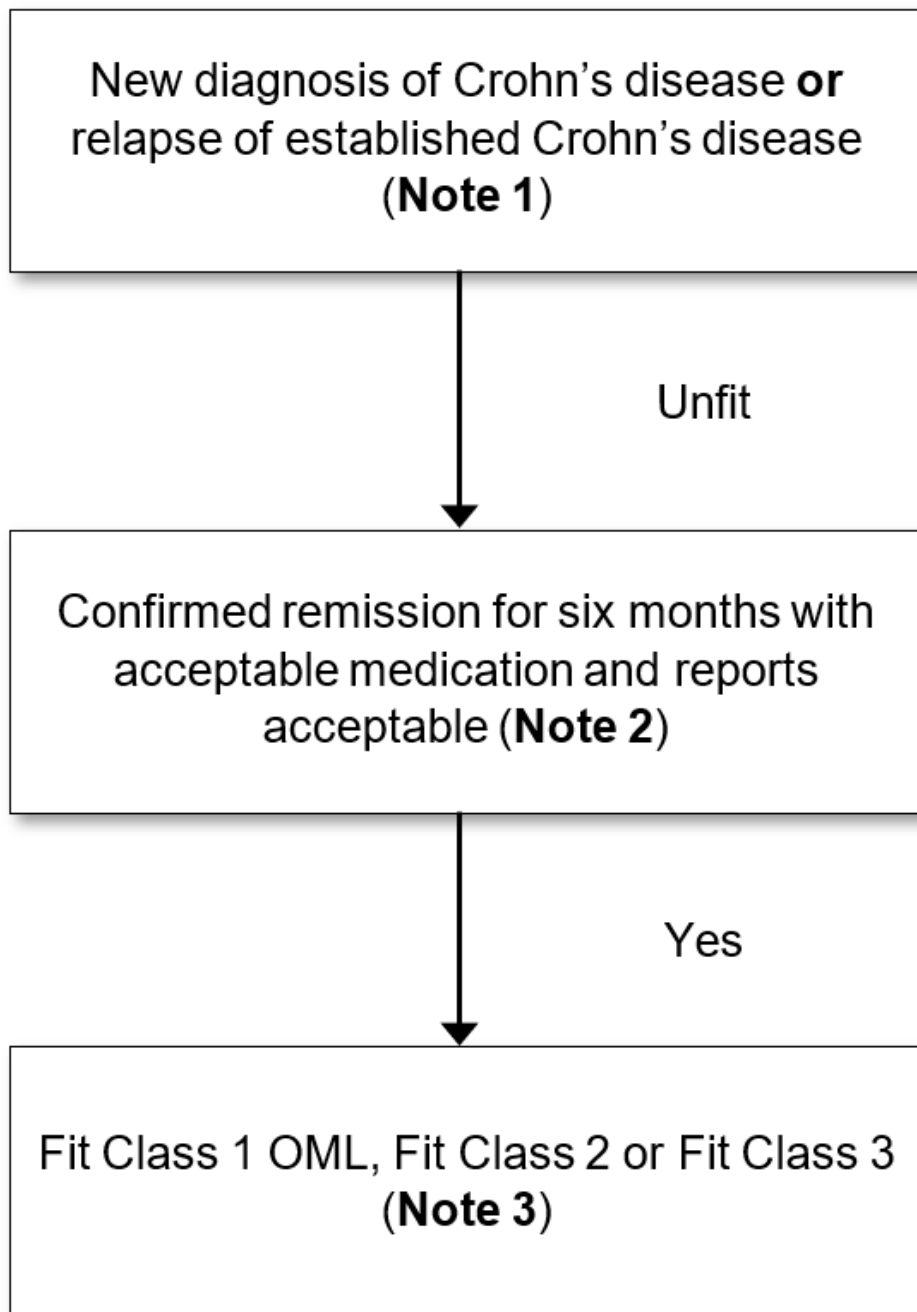


# Class 1 / 2 / 3 Medical certification – Crohn's disease

This flow chart sets out the medical certification process for Class 1 / 2 / 3 following a new or established diagnosis of Crohn's disease.



## Diagnosis or relapse of established Crohn's disease

**Note 1** applies to both initial and existing applicants:

- symptoms are variable but may include diarrhoea, abdominal pain, weight loss, fever, malaise and / or anorexia
- new diagnoses can be confirmed by symptomology, endoscopy, imaging, histological and / or serological results
- initial applicants should be counselled on potential long periods of not being able to maintain certification due to the progressive nature of the disease
- applicants should be assessed as unfit if recurrence of Crohn's disease (including extra-intestinal manifestations)
- a consultant gastroenterologist report outlining symptoms, examination, investigations (including pathology and imaging reports as appropriate), initiation of treatment, onward management, follow-up, risk of progression and risk of recurrence of symptoms; a Crohn's disease activity index (CDAI) score is helpful
- the report should be obtained **before** submission to a CAA medical assessor (a [general guidance for a medical report](#) template is available)
- acute symptoms, commencement of new medication, abdominal surgery (elective or emergency procedures) or admission to hospital for recurrence shall require the applicant to be assessed as unfit
- if commenced on treatment, remission (for example, clinical, endoscopic or serological) must be confirmed by a consultant gastroenterologist; a CDAI score is helpful, with a score less than 150 being suggestive of remission.
- applicants with a CDAI score between 150 and 400 may have signs of active disease and should be assessed on an individual basis

## Remission and medication

**Note 2**

Approximate date of remission should be indicated in the specialist report.

Medication should be a stable dose with results from monitoring (for example, U&E, FBC).

Earlier return may be considered by a CAA medical assessor in cases of mild disease or curative bowel resection.

### Unacceptable medication

- oral corticosteroids
- acute commencement of antibiotics
- biological immunomodulators – not acceptable for initial acute treatment but acceptable for maintenance therapy

## Aeromedical certification

**Note 3**

Class 1 - OML to remain in place if Crohn's disease requires ongoing long term medical therapy. If maintaining remission and off all medication for at least 12 months, a CAA medical assessor may consider OML removal. Initial Class 1 certification will be considered on a case by case basis and is likely to require a substantial periodic of remission.