

Digestive Disease Week



Digestive Disease Week (DDW) 2015 will take place in Washington, DC, from May 17 to 19. With more than 400 scientific sessions and more than 4000 abstracts, the meeting will provide abundant opportunities to learn about the latest treatment advances and emerging research. In case you miss something, DDW is granting free access to online recordings of the oral presentations, and nearly all will be available soon after the meeting. DDW is the largest gathering of physicians and researchers involved in the management of gastrointestinal disorders. Part of the pleasure of attending this meeting lies in encountering a former colleague, classmate, or student among the 14,000 attendees. Notwithstanding the connections we keep via e-mail or phone, there is a singular joy in the unexpected sight of a familiar face.

One change to this year's meeting structure is that the 4 sponsoring societies will unite to present 2 late-breaking abstract sessions. The American Gastroenterological Association, the Society for Surgery of the Alimentary Tract, the American Association for the Study of Liver Diseases, and the American Society for Gastrointestinal Endoscopy will present their latest research together, underscoring the potential for advancements in one field to reverberate in another. The societies merged their meetings in the 1970s to create one event that would bring together clinicians and researchers from these disciplines, fostering an atmosphere of collaboration that continues to enhance our practice.

Much like DDW, this issue of *Gastroenterology & Hepatology* examines many different topics of interest to our community. In a feature article, Dr Sammy Saab and his colleagues discuss the use of antiviral therapy in elderly patients with hepatitis C virus (HCV) infection. The emergence of direct-acting antiviral agents has revolutionized the treatment of HCV infection. Many trials have now provided data from subgroup analyses of their older patients. Dr Saab and his colleagues gather the existing data and explore issues raised by the management of this population. However, even with the proven success of direct-acting

antiviral agents, many patients face barriers to access. In our Advances in Hepatology column, Dr David E. Bernstein discusses factors that are restricting the use of these lifesaving therapies.

A feature article by Drs Nicolas A. Villa and M. Edwyn Harrison describes the diagnosis, classification, and management of biliary strictures, a common complication of liver transplantation. Although biliary strictures are associated with significant morbidity and mortality after liver transplant, advances in endoscopic therapy and interventional radiology have improved outcomes by decreasing the need for surgical repair or retransplant. In another feature article, Drs Steven Naymagon and Thomas A. Ullman review the current techniques for surveillance of dysplasia in inflammatory bowel disease patients, with a focus on chromoendoscopy. The authors elucidate key points in the controversy over the best approaches to diagnosis and management. In our Advances in IBD column, Dr William J. Sandborn examines new targets for small molecules in inflammatory bowel disease. The broad classes for which new agents are currently in clinical development include Janus kinase inhibitors, such as tofacitinib; sphingosine-1-phosphate receptor modulators, such as RPC1063 (ozanimod); and SMAD7 antisense inhibitors, such as mongersen. In our Advances in GERD column, Dr Vic Velanovich discusses nonmedical treatment options, such as endoluminal and Nissen funduplications, for gastroesophageal reflux disease.

I hope to see you at DDW and hope that you enjoy this issue.

Sincerely,

Gary R. Lichtenstein, MD, AGAF, FACP, FACG