

Hepatitis B

There is still no cure for chronic hepatitis B, which affects more than 350 million people worldwide and is the largest cause of liver cancer. A feature article in this month's issue of *Gastroenterology & Hepatology* focuses on various potential direct-acting antiviral agents and immunomodulators being developed for the treatment of this disease. As Dr Marion G. Peters and Dr Stephen Locarnini note, over 30 new molecules are currently being studied for the management of chronic hepatitis B by targeting the life cycle of the virus and the host immune response. The authors review the phases of the disease and the life cycle of the virus, mechanisms of action of potential treatments, and possible combinations of these treatments.

Our other 2 feature articles this month focus on dysplasia. In one of the articles, Dr Shirley Cohen-Mekelburg, Dr Yecheskel Schneider, Dr Stephanie Gold, Dr Ellen Scherl, and Dr Adam Steinlauf highlight recent advances in the diagnosis and management of colonic dysplasia in the setting of inflammatory bowel disease (IBD). They discuss the pathogenesis of colorectal cancer in IBD, timing of surveillance and various methods that can be used, diagnosis and treatment of low- and high-grade dysplasia, and special circumstances (such as the setting of primary sclerosing cholangitis, early-onset colorectal cancer, and ileal pouch-anal anastomosis).

In the other feature article, Dr Anna M. Buchner focuses specifically on the role of chromoendoscopy in the setting of colorectal dysplasia. As the author notes, chromoendoscopy is comprised of image-enhanced endoscopic techniques such as dye-based chromoendoscopy (using topical dyes such as methylene blue or indigo carmine) and electronic chromoendoscopy (using optical technologies such as narrow-band imaging, flexible spectral imaging color enhancement, and i-scan). She reviews the various types, technical aspects, and safety of the techniques, as well as their roles in IBD, polyp characterization and histology prediction, hereditary syndromes, and adenoma detection in average-risk patients.

Polyps in the gastrointestinal tract and their endoscopic removal are the focus of our Advances in Endoscopy column. Dr Michael B. Wallace discusses the endoscopic techniques that can be used for this purpose,

the benefits and limitations of associated solutions and contrast agents, and his study in this area, among other issues.

In our Advances in GERD column, Dr Ikuo Hirano highlights the use of dietary therapies for the management of eosinophilic esophagitis. Among other issues, he explains the connection between this disease and food, how food triggers for the disease have traditionally been identified, how the various dietary therapies for these patients compare, the possibility of combining dietary therapy with other forms of treatment, and the challenges of dietary therapy.

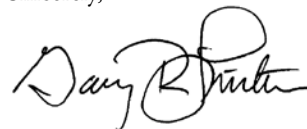
Our Advances in IBD column features an interview with Dr Miguel Regueiro on the use of medical homes for patients with IBD. Among other issues, he describes why there is a need for a new model of patient care in the setting of IBD, explains what is actually meant by an IBD medical home and how it differs from previous care models, and discusses its advantages and limitations.

In our Advances in Hepatology column, Dr Beatrice L. Madrazo describes how nonalcoholic steatohepatitis can be diagnosed without requiring a liver biopsy. She discusses issues such as how this disease has historically been diagnosed, the accuracy of various imaging techniques as well as their advantages and disadvantages, and the role of elastography.

Our bimonthly HCC in Focus column returns with an interview with Dr Claude Sirlin. He explains why the Liver Imaging Reporting and Data System was created, how it is currently being used, and when the next update is expected, as well as discusses issues such as the system's most important categories, its use in integrated interpretation of multiple imaging modalities, and its role in multifocal disease.

I hope you find these articles interesting and useful.

Sincerely,



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

