

# Brain-Gut Therapies and Irritable Bowel Syndrome



Can brain-gut therapies be helpful in the management of patients with irritable bowel syndrome (IBS)? In this issue of *Gastroenterology & Hepatology*, Dr Megan E. Riehl examines the emerging use of these therapies, particularly cognitive behavioral therapy and gut-directed hypnosis, for the treatment of patients with IBS. In our Advances in IBS column, she explains why behavioral therapy may be useful in this patient population, which brain-gut treatment modalities have shown the most benefit in this setting and how they work, how in-clinic treatment compares to Internet-based treatment, which patients are ideal candidates for these therapies, the role of the gastroenterologist in the administration of these treatments, and when patients should be referred for these interventions, among other issues.

Cognitive behavioral therapy is also discussed in one of our feature articles this month. Dr Steven C. Lin and Dr Adam S. Cheifetz provide a comprehensive overview of the use of complementary and alternative medicine (CAM) in the management of patients with inflammatory bowel disease (IBD). They examine the data (or lack thereof) for treating IBD patients with various CAM therapies, including probiotics; curcumin; cannabis; fish oil; Chinese herbal medicine; acupuncture; moxibustion; and cognitive-physical (mind-body) therapies, such as cognitive behavioral therapy, mindfulness, gut-directed hypnotherapy, yoga, and exercise.

Another feature article this month focuses on the management of children with nonalcoholic fatty liver disease (NAFLD). Dr Jay Shah, Dr Toluwalase Okubote, and Dr Naim Alkhouri describe the epidemiology, natural history, outcomes, screening, diagnosis, and various treatment options of pediatric NAFLD. They also provide summaries of the recent updates to guidelines on the diagnosis and management of pediatric NAFLD from the North American Society for Pediatric Gastroenterology, Hepatology, and Nutrition and the

American Association for the Study of Liver Diseases.

Also included among our feature articles this month is the second of our 2-part series on primary sclerosing cholangitis. Dr James H. Tabibian, Dr Ahmad H. Ali, and Dr Keith D. Lindor examine the risk of various types of cancer (cholangiocarcinoma, gallbladder carcinoma, hepatocellular carcinoma, and colorectal carcinoma) in patients with primary sclerosing cholangitis, as well as cancer prevention and surveillance in this setting.

Our Advances in Hepatology column focuses on emerging treatment approaches for hepatitis B virus (HBV) infection. Among other issues, Dr W. Ray Kim discusses the current and ideal goals of HBV treatment, the concept of functional cure and the critical components for achieving it, the treatment options currently available, the novel treatment approaches and targets presently undergoing active investigation, and whether the elimination of hepatitis B surface antigen is meaningful.

Finally, our Advances in Endoscopy column, authored by Dr Nicholas J. Shaheen, highlights the endoscopic management of patients with Barrett esophagus. He discusses the current guidelines for endoscopic screening and surveillance; techniques that can be used for endoscopic eradication of dysplastic and nondysplastic Barrett esophagus and how they should be selected; how often disease can recur after treatment; and management of buried glands, along with related issues.

May this issue provide you with helpful information that you can put to good use in your clinical practice.

Sincerely,

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