

# Food and Irritable Bowel Syndrome



It is well recognized that food can play a role in diseases, but just how important is the relationship between food and irritable bowel syndrome (IBS)? This topic is explored in two of our articles in this month's issue of *Gastroenterology & Hepatology*. One of our feature articles focuses on the use of dietary therapy for the management of IBS patients. Dr Monia E. Werlang, Dr William C. Palmer, and Dr Brian E. Lacy examine the various diets that have been used to treat IBS patients and focus their discussion on the recent data, advantages, and challenges of the low-fermentable oligosaccharide, disaccharide, monosaccharide, and polyol diet and the gluten-free diet. As the authors note, these two diets have been the most-studied and most frequently used dietary interventions for IBS.

Food and IBS are also discussed in our Advances in IBS column, which focuses on the role of food allergies and food intolerances in patients who have IBS. Dr Sheila E. Crowe starts by explaining the differences between food allergies and food intolerances and then discusses how common these conditions are in the setting of IBS, their typical presentations, how they can be diagnosed, and how they can be managed, along with other related issues.

Our other feature article this month also involves diet, specifically the potential role of vitamin D in elderly patients who have inflammatory bowel disease (IBD). In their examination of this issue, Dr Deepthi Kagolanu, Dr Irving Levine, and Dr Seymour Katz explore the significance of vitamin D in IBD, vitamin D deficiency in the elderly population and in IBD patients overall, and the evidence for and against age as a risk factor for vitamin D deficiency in IBD.

Our IBD coverage continues with our Advances in IBD column, which provides an update on fecal microbiota transplantation in patients with IBD. Dr Monika Fischer examines the randomized, controlled trials that have been conducted in ulcerative colitis patients by comparing their remission rates, delivery methods, donors, and stool preparations, as well as discussing the

lessons that have been learned and questions that remain from these trials. In addition, she highlights ongoing studies in this area, among other issues.

In our Advances in Endoscopy column, Dr John R. Saltzman provides an overview of the use of hemostatic spray for endoscopic hemostasis of gastrointestinal bleeding. He covers issues such as the administration of the spray, its advantages and limitations, how it can be used with conventional hemostatic interventions, the data currently available on its safety and efficacy (including head-to-head research), and its approved indications.

Our Advances in Hepatology column, authored by Dr Naga Chalasani, focuses on drug-induced liver injury. Among other issues, he discusses the different types of drug-induced liver injury, the most common causes of idiosyncratic drug-induced liver injury, the possible mechanisms behind this condition, the most common risk factors, the current status of developing biomarkers for diagnosis and prognostication of this condition, and how affected patients should be treated.

Finally, our bimonthly HCC in Focus column returns with an interview with Dr Ghassan K. Abou-Alfa on the role of checkpoint inhibitor therapy in patients with hepatocellular carcinoma (HCC). His discussion covers the various checkpoint inhibitors and combinations that have been studied in the setting of HCC, the issue of sequencing, and the adverse events that may occur in patients using this therapeutic approach, among other issues.

I hope that you find these articles informative and relevant, and I wish you and your patients a happy, healthy, and prosperous new year.

Sincerely,

A handwritten signature in black ink that reads "Gary R. Lichtenstein". The signature is fluid and cursive, with the first name being the most prominent.

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