

Inherited Gastrointestinal Syndromes

How can clinicians best use genetic testing and evaluate a patient's risk for inherited syndromes involving the gastrointestinal tract? This question is explored in a feature article in this month's issue of *Gastroenterology & Hepatology*. Ms Jessica Stoll and Dr Sonia S. Kupfer review important genetic testing issues such as panel testing to evaluate the risk of cancer, cascade testing in family members, and the increasing use of direct-to-consumer genetic testing. The authors also examine risk assessment as well as testing and counseling for various inherited gastrointestinal syndromes, including hereditary colorectal cancer and hereditary polyposis, hereditary gastric cancer, and hereditary pancreatic cancer.

Our other feature article this month examines novel techniques for endoscopic hemostasis of gastrointestinal bleeding. Dr Edward Yang, Dr Michael A. Chang, and Dr Thomas J. Savides explore different new approaches for controlling gastrointestinal bleeding, including over-the-scope clips, endoscopic ultrasound guidance for variceal embolization, hemostatic powders such as TC-325, and the Doppler endoscopic probe. The authors include a table comparing the applications, advantages, disadvantages, and evidence associated with the different techniques.

The American Gastroenterological Association's recent technical review on diarrhea-predominant irritable bowel syndrome (IBS) and functional diarrhea is the focus of our bimonthly Advances in IBS column. Dr William D. Chey, one of the authors of the technical review, discusses its purpose and methodology, the various tests that were examined and their key findings, how the review can apply to clinical practice, and what research needs still remain.

The use of fecal microbiota transplantation (FMT) in patients with inflammatory bowel disease (IBD) and

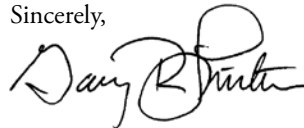
Clostridium difficile infection is explored in our Advances in IBD column. Dr Ari Grinspan discusses the relationship between these conditions, the effectiveness of FMT in this setting, whether FMT is associated with IBD flare or improvement, predictors of FMT failure, and different FMT delivery mechanisms and preparations, along with other issues.

In our Advances in Hepatology column, Dr Cynthia Levy provides an overview of treatments in the pipeline for cholestatic liver disease. She starts by reviewing the therapies currently available and their limitations, and then examines therapies being investigated for the treatment of primary biliary cholangitis and primary sclerosing cholangitis, including new farnesoid X receptor agonists, peroxisome proliferator-activated receptor agonists, and fibroblast growth factor 19 mimetics.

Finally, ablative treatment of hepatocellular carcinoma (HCC) is highlighted in our bimonthly HCC in Focus column. Along with related issues, Dr Steven C. Rose examines the role of radiofrequency ablation and microwave ablation in patients with HCC, recent ablative advances in this setting, the safety of the ablative therapies, and factors that should be considered when deciding which of these treatments to use in a patient with HCC.

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, FACG

