

# Use of Atezolizumab and Bevacizumab for the Treatment of Hepatocellular Carcinoma



Is atezolizumab and bevacizumab combination therapy the future of hepatocellular carcinoma (HCC) treatment? This question is explored in this month's issue of *Gastroenterology & Hepatology*. In our HCC in Focus column, Dr Anthony El-Khoueiry first examines the current first-line medical therapies for HCC and then reviews atezolizumab and bevacizumab combination therapy. He discusses recent clinical trial data on the combination, as well as issues such as whether the combination will be the best first-line HCC treatment by the end of 2020 and which patients should receive the combination for first-line therapy and which patients should receive other medical treatment options.

One of our feature articles this month highlights the abnormal topographic pattern of esophagogastric junction outflow obstruction (EGJOO). As Dr Claire Beveridge and Dr Kristle Lynch note, EGJOO is a relatively new diagnosis. The authors provide an overview of EGJOO, including its definition and demographics, how to diagnose it, associated manometric concerns, the use of timed barium esophagram and the functional lumen imaging probe, and various treatment options (eg, medical therapies, botulinum toxin injection of the lower esophageal sphincter, dilation, and myotomy).

Our other feature article focuses on the use of lifestyle modifications to treat nonalcoholic fatty liver disease, including the progressive form of the disease known as nonalcoholic steatohepatitis (NASH). The lifestyle recommendations most commonly given to these patients involve healthy diet and exercise. In their article, Dr James Philip Esteban and Dr Amreen Dinani examine other lifestyle modifications, focusing on light alcohol consumption, coffee, shift work, social jet lag, meal timing, sleep duration, and obstructive sleep apnea.

Our coverage of NASH continues with the debut of our NASH in Focus column, with Dr Stephen A. Harrison as the section editor. Our first column, which is authored by Dr Rohit Loomba, highlights the use of noninvasive biomarkers to diagnose patients with NASH and stage 2 or 3 fibrosis. He discusses the importance of the stage of fibrosis and reviews various serum, imaging, and combination biomarkers. He also discusses his own experiences with noninvasive biomarkers, along with related issues.

Our Advances in IBD column examines the recent SERENE studies, which compared high-dose induction therapy of adalimumab with conventional dosing. Dr Brian Feagan explores how adalimumab dosing was originally determined, why dose-ranging studies were needed, how the studies were designed and what their main findings were, and whether dose intensification should still be used, among other issues.

Finally, our Advances in Endoscopy column focuses on endoscopic resection of duodenal adenomas. Along with related issues, Dr Peter V. Draganov examines how treatment compares for ampullary and nonampullary adenomas, what affects the endoscopic resectability of duodenal adenomas, when piecemeal resection is appropriate, the success rate for complete endoscopic resection, and when surgical referral is needed.

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