

Screening for Depression in Patients Who Have Inflammatory Bowel Disease



Do all patients who have inflammatory bowel disease (IBD) need to be screened for depression, and when should any screening occur? These questions are explored in the Advances in IBD column in this month's issue of *Gastroenterology & Hepatology*. In this column, Dr Laurie Keefer also reviews the prevalence of depression and depressive symptoms in this patient population and the bidirectional pathways between IBD and depression. Along with related issues, she also discusses the most common screening questionnaires for depression and offers some strategies and tips that gastroenterologists can use to improve their screening and help them question patients with IBD about their mental health.

One of our review articles this month provides an update on the assessment and treatment of patients who have portal hypertension. Dr Gabriella Aitchison, Dr Carensa Cezar, Ms Irene John, and Dr Binu V. John examine recent studies that have been performed to evaluate portal hypertension using the noninvasive methods of transient elastography (which can be used to assess stiffness in both the liver and the spleen), magnetic resonance elastography, and multiparametric magnetic resonance imaging. In addition, the authors review advances in the management of this condition involving nonselective beta blockers, statins, and albumin.

Our other review article focuses on pediatric non-alcoholic fatty liver disease (NAFLD). As Dr Katherine F. Sweeny and Dr Christine K. Lee note, there has been an increase in the incidence of pediatric NAFLD in the past 10 years. Although NAFLD in children has some similarities with NAFLD in adults, histologic differences have been found in liver biopsies. The authors examine NAFLD in children, including its epidemiology, clinical presentation, pathogenesis, evaluation, and management. Because there are no medications approved for this disease in children, current management consists of lifestyle change to reduce the intake of calories and increase physical activity.

Our coverage of hepatology continues with two columns involving emerging treatments for liver diseases.

Our Advances in Hepatology column explores novel therapeutic strategies for patients who have primary biliary cholangitis. Along with related issues, Dr Martin Moehlen discusses recent trial data on different types of drugs in development, such as peroxisome proliferator-activated receptor agonists, second-generation farnesoid X receptor agonists, and ileal bile acid transporter inhibitors. Our NASH in Focus column centers on drug development for nonalcoholic steatohepatitis cirrhosis. Dr Naim Alkhouri discusses the challenges of developing drugs for the management of this advanced disease, the surrogate outcomes used in trials, the studies currently underway or planned in this area, and the potential role of combination therapy, among other issues.

Esophageal cancer prevention is the focus of our Advances in GERD column, which is authored by Dr John Clarke. His discussion includes factors that predispose individuals to esophageal cancers, the use of lifestyle modification and risk management for esophageal cancer prevention, which individuals should undergo screening, and the roles of image-enhanced endoscopy and artificial intelligence in esophageal cancer screening, diagnosis, and prevention.

Finally, our Advances in IBS column highlights disorders of gut-brain interaction. Along with related issues, Dr Gregory S. Sayuk discusses how irritable bowel syndrome fits into this category of disorders, the role of glutamatergic signaling, the diagnosis of these conditions, the use of central neuromodulators such as tricyclic antidepressants and selective serotonin reuptake inhibitors, and recent research on neuromodulation.

As 2021 comes to an end, I hope that you enjoy all of these articles and find them interesting and useful in your clinical practice.

Sincerely,

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