

Examining Ergonomic Issues in Endoscopy



How can ergonomic wellness be best supported in the field of endoscopy in 2024? This question is explored in the Advances in Endoscopy column in this month's issue of *Gastroenterology & Hepatology*. Dr Melissa Teitelman discusses musculoskeletal-related injuries associated with the performance of endoscopy and how working with a physical therapist can help endoscopists optimize their technique and environment to reduce injuries. Additionally, she looks at the lack of significant improvements in endoscope redesign and obstacles to solving ergonomic problems in endoscopy. Other topics of discussion include easy adjustments to the setup of the endoscopy suite and the ideal ergonomically designed endoscopy unit.

One of our review articles this month explores the use of different noninvasive tests for assessment of hepatic fibrosis. Dr Nikita Chadha and Dr Richard K. Sterling note the growing prevalence of noninvasive tests, particularly because of the lack of risks associated with invasive procedures such as liver biopsy. The authors examine study data on blood-based noninvasive tests such as the Fibrosis-4 index, the Aspartate Aminotransferase to Platelet Ratio Index, and Nonalcoholic Fatty Liver Disease Fibrosis Score. They also review research on imaging-based noninvasive tests such as transient elastography, shear wave elastography, and magnetic resonance elastography. Additionally, the authors explore the utility of combining blood-based noninvasive tests with imaging-based ones.

Our other review article this month examines current family planning considerations for people who have inflammatory bowel disease (IBD). As Dr Lori M. Gawron, Dr Jessica B. Johnson, Dr Ann D. Flynn, and Dr Alexandra L. Woodcock point out, the *Dobbs v Jackson Women's Health Organization* US Supreme Court decision recently ended federal protections for abortion care. The authors review contraceptive counseling considerations, including the efficacy, safety, and adverse effect profiles of different contraceptive methods, as well as strategies for aligning current family planning and IBD care.

In other IBD content, Dr Christina Ha examines mild Crohn's disease in our Advances in IBD column. She discusses how this condition can be defined and some of its diagnostic difficulties. She also covers mild Crohn's disease treatment, including when it might not

be needed, how to identify the best therapeutic strategy, second-line treatment, the role of advanced therapy, and the effectiveness of dietary treatment. Her discussion also includes holistic management, monitoring for disease progression, and common misconceptions.

Our Advances in Hepatology column places a spotlight on the use of the transjugular intrahepatic portosystemic shunt (TIPS) in patients with liver disease. Dr Justin R. Boike discusses when early TIPS use should be considered and how patients should be assessed. Other topics of discussion include advances in TIPS technology, the risk of developing hepatic encephalopathy after TIPS, and how to follow patients post-TIPS.

The role of the gut microbiome in irritable bowel syndrome (IBS) is explored in our Advances in IBS column. Dr Madhu Grover reviews changes in the microbiota that may affect the development of IBS and the difficulties of understanding these changes. Also discussed are the relationship between intestinal barrier dysfunction and IBS symptoms, the importance of the metabolome, and therapeutic approaches that target the microbiota, along with related topics.

Finally, our MASH in Focus column highlights resmetirom, which was recently approved by the US Food and Drug Administration for noncirrhotic metabolic dysfunction-associated steatohepatitis (MASH) with moderate to advanced liver fibrosis along with diet and exercise. Sadly, Dr Stephen A. Harrison, who has served as our section editor of MASH since 2020, died after being interviewed for this column. He played a key role in the development of resmetirom and in the field of MASH. He was passionate about his work and touched countless lives. We will miss working with him and appreciate his many contributions to the journal. We send our condolences to his family and friends.

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