

Exploring Screening for Colorectal Cancer



How can we best approach screening for colorectal cancer? This month's issue of the journal *Gastroenterology & Hepatology* highlights screening for colorectal cancer, which remains one of the most common types of cancer and causes of cancer death in the United States. In a comprehensive feature article, Dr Christina Wang and Dr Aasma Shaukat review the current state of colorectal cancer screening, including recent trends in epidemiology and changes in guidelines. The authors examine the comparative efficacy and cost-effectiveness of current screening modalities for colorectal cancer. Additionally, the authors discuss the colorectal cancer screening cascade of 1- or 2-step testing, opportunistic vs organized screening, and patient preferences for screening tests. Other topics of discussion include screening challenges and opportunities, blood-based tests in development, and the potential role of artificial intelligence.

Another feature article this month focuses on the evolution of pharmacotherapy in the treatment of patients with obesity. Dr Shayan Amini, Dr Daniel A. Burkholder, Dr Ronan P. Allencherril, Dr Raj Shah, and Dr Thomas R. McCarty note that obesity affects millions of people worldwide and is a complex disease for which different therapeutic approaches have been tried. The authors review the traditional approach of lifestyle interventions such as diet and exercise, the role of bariatric surgery, and the use of endoscopic treatment options. The authors then focus on pharmacotherapies over the years, from phentermine/topiramate and bupropion/naltrexone to the increasingly popular glucagon-like peptide-1 (GLP-1) receptor agonists and more novel dual GLP-1/glucose-dependent insulinotropic polypeptide receptor agonists. Finally, the authors explore research on weight loss and comorbidity improvement with these novel agents, potential side effects, issues surrounding cost and reimbursement, the use of pharmacotherapy along with other interventions, and future directions.

Our third feature article this month explores evolving therapies in autoimmune hepatitis with a focus on recent advances. In an in-depth overview of this disease, Dr Ilkay Ergenc, Dr Alexandra Frolkis, Dr Yooyun

Chung, and Professor Michael A. Heneghan outline the diagnostic criteria, spectrum of clinical presentations, and definitions of response to therapy. The authors also review research on first-line treatment such as corticosteroids and azathioprine, second-line therapies such as mycophenolate mofetil, third-line options such as calcineurin inhibitors, as well as the future of autoimmune hepatitis treatment.

This month's Advances in Hepatology column also focuses on autoimmune hepatitis, specifically the use of azathioprine and mycophenolate mofetil and whether mycophenolate mofetil has a potential role in first-line treatment. Dr Alan Bonder discusses the effectiveness and safety of azathioprine in autoimmune hepatitis, research comparing mycophenolate mofetil vs azathioprine, limitations to keep in mind when considering these findings, and his own experiences using these agents, along with related topics.

Our Advances in IBD column explores the different interleukin (IL)-23 inhibitors currently on the market for the treatment of inflammatory bowel disease. Professor Edouard Louis discusses the two categories of IL-23 inhibitors, whether any of these agents appear to be more effective or safer than others, and if there are significant differences among the second-generation IL-23 inhibitors. Other topics of discussion include how to choose among the agents in this class and IL-23 inhibitors in development.

Finally, our quarterly content partnership with the Crohn's & Colitis Foundation continues with a spotlight on new brochures for patients. Readers can scan the QR code on page 187 to access brochures on inflammatory bowel disease medications and their side effects in English and Spanish.

I hope that this issue provides valuable insights for your clinical practice.

Sincerely,

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