

Examining Exercise in Metabolic Dysfunction-Associated Steatohepatitis



How and why should patients who have metabolic dysfunction-associated steatohepatitis (MASH) exercise? The MASH in Focus column in this month's issue of *Gastroenterology & Hepatology* places a spotlight on exercise in this patient population. Dr Jonathan G. Stine discusses the various benefits of exercise in patients with MASH and current guidance for exercise, including the optimal frequency, intensity, time, and type. Additionally, he discusses topics such as which tools clinicians can use to evaluate and prescribe regular exercise to patients with MASH, the role of exercise professionals in MASH management, and whether behavioral coaching and digital therapeutics can help exercise adherence.

Our feature article this month focuses on Barrett esophagus (BE) screening. Dr Nicholas Shaheen, Dr Prasad Iyer, and Dr Swathi Eluri explore commonly used BE screening criteria, different societal guidelines, and possible explanations for the current suboptimal screening rates. Other topics of discussion include swallowable cell collection devices for BE screening such as Cyto-sponge with trefoil factor 3 and EsoCheck/EsoGuard, as well as the potential use of volatile organic compounds and peripheral blood-sample molecular biomarkers. The authors also consider alternatives to esophageal mucosal visualization such as transnasal endoscopy and tethered capsule endomicroscopy and discuss strategies for improving the identification of screen-eligible patients.

Our Advances in IBD column examines the management of inflammatory bowel disease (IBD) patients during and after cancer. Dr Jordan Axelrad discusses the risk of cancer in patients with IBD and which IBD medications have been associated with specific cancers. Also discussed are whether cancer therapy can impact the course of IBD, if IBD treatments should be discontinued, and monitoring patients with prior cancer, along with related topics.

Spontaneous bacterial peritonitis prophylaxis is the focus of our Advances in Hepatology column. Dr Richard K. Sterling reviews traditional primary and secondary prophylaxis for this condition and why there

have been calls recently to reconsider such prophylaxis. He also discusses recent research in this area, including a study that he and his colleagues conducted comparing secondary prophylaxis with no prophylaxis.

Our Advances in Endoscopy column, authored by Dr Jason A. Dominitz, explores blood-based colorectal cancer screening. His discussion includes the availability and accuracy of this screening modality, how it compares with stool-based tests and colonoscopy, and what US gastroenterology societies recommend regarding its use.

Our Advances in Upper GI Disorders column features an interview with Dr Stuart J. Spechler on the relationship between eosinophilic esophagitis (EoE) and achalasia. Topics of discussion include how achalasia is viewed in relation to EoE, recent research supporting an association between these conditions, and whether treatment of EoE or achalasia should change based on this association.

Our Case Study Series section focuses on patient-centered management of irritable bowel syndrome with constipation (IBS-C). Dr Kavita Kongara presents the case of an IBS-C patient and discusses the importance of listening to all of the patient's concerns, following up to evaluate response, and tailoring treatment if response is inadequate, along with other management steps.

Finally, our quarterly content partnership with the Crohn's & Colitis Foundation continues with a spotlight on the We Can't Wait app, which helps users find restrooms and links to educational resources and legislative updates about restroom access laws. Readers can scan the QR code on page 344 for more information.

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

Sincerely,

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