Exploring the Use of Terlipressin in Candidates for Liver Transplant



hould terlipressin be used in liver transplant candidates? This question is explored in a feature article in this month's issue of the journal *Gastroenterology & Hepatology*. Dr Nicodemus Ong and Dr Florence Wong review the complex pathophysiology of hepatorenal syndrome, how terlipressin works, and clinical trial data on its use in this setting. The authors explain the controversy regarding the use of this drug in candidates for liver transplant, offering arguments against its use as well as arguments supporting its use. The authors also discuss possible solutions to resolve the controversy, including the Model for End-Stage Liver Disease lock strategy, as well as future research in this area.

Our other feature article this month focuses on eosinophilic gastrointestinal diseases (EGIDs) other than eosinophilic esophagitis (EoE), which is the most well-recognized in this group of disorders. As Dr Angela Y. Lam and Dr Nirmala Gonsalves note, there is not much guidance or consensus available for the non-EoE EGIDs. The authors review the evolution of the nomenclature of EGIDs as well as the clinical features, epidemiology, diagnosis, and natural history of these diseases, including eosinophilic gastritis, eosinophilic enteritis, and eosinophilic colitis. Also covered in this article are the presence of esophageal eosinophilia, the diagnostic approach (including nuances in histologic evaluation), and the management of patients with non-EoE EGIDs.

In our Advances in Upper GI Disorders column, Dr Ronnie Fass places a spotlight on the treatment of gastroesophageal reflux disease (GERD) using on-demand therapy. His discussion includes the advantages of moving to a noncontinuous dosing strategy, the attributes that make an antireflux medication a good on-demand therapy for GERD, the evidence for using this approach with proton pump inhibitors and with potassium-competitive acid blockers, and which patients are not suitable candidates for on-demand therapy.

Capsule technologies and wireless motility capsule (WMC) testing are the focus of our Advances in IBS column. Among other topics, Dr Braden Kuo discusses the advantages and limitations of capsule technologies, which patients with disorders of gut-brain interaction are candidates for WMC testing, contraindications and adverse events of WMC testing, and future directions in this area.

Our Advances in IBD column, which is authored by Dr Yinghong (Mimi) Wang, centers on immune checkpoint inhibitor enterocolitis. Topics of discussion include the similarities and differences between immune checkpoint inhibitor enterocolitis and inflammatory bowel disease, whether inflammatory bowel disease patients can be treated with immunotherapy, and management of immune checkpoint inhibitor enterocolitis, including the role of fecal microbiota transplantation.

Finally, our MASH in Focus column features an interview with Professor Philip Newsome on the use of fibroblast growth factor 21 (FGF21) agonists for the treatment of metabolic dysfunction-associated steatohepatitis (MASH). His discussion includes why this therapeutic approach is being studied in MASH patients, how these agents work, potential limitations, and recent research on FGF21 agonists in development (efruxifermin, pegozafermin, and efimosfermin) as well as combination therapy with glucagon-like peptide-1 receptor agonists.

May this issue provide you with helpful information that you can put to good use in your clinical practice.

Sincerely,

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