

# Exploring Current and Emerging Therapies for Patients With Primary Biliary Cholangitis



Up to 40% of patients with primary biliary cholangitis (PBC) do not respond adequately to ursodeoxycholic acid, which is well established for first-line treatment. One of the feature articles in this month's issue of *Gastroenterology & Hepatology* explores the second-line PBC treatment options currently available and in the pipeline. Dr Keri-Ann Buchanan-Peart, Dr Divya Dasani, and Dr Cynthia Levy review the diagnosis and presentation of this condition, the main goals of PBC treatment, and the recent withdrawal of the second-line therapy obeticholic acid from the US market. The authors also examine research on elafibranor and seladelpar, which were approved for second-line PBC treatment last year, as well as fenofibrate and bezafibrate, which are sometimes used off-label. Additionally, the authors discuss promising drugs in development for PBC and for treatment of associated pruritus, one of the most common symptoms of this condition.

Inflammatory bowel disease (IBD) in women is the focus of our other feature article this month. Dr Sara Ghoneim and Dr Bharati Kochar examine the unique challenges that women with IBD face at different stages of life. The authors review the potential influence of IBD on puberty and menarche such as delayed puberty and growth concerns. They also examine clinical overlaps and diagnostic challenges of gynecologic conditions such as endometriosis and uterine fibroids, as well as the management of gynecologic symptoms and conditions commonly experienced by women who have IBD. Other topics of discussion include the safety and efficacy of contraceptive methods in women with IBD, navigation of pregnancy, and the effects of menopause in this patient population.

Our Advances in Hepatology column, authored by Dr Joseph K. Lim, reviews portal vein thrombosis in cirrhotic patients. His discussion includes what to do when portal vein thrombosis is suspected, when observation is sufficient, which of these patients should receive anticoagulation and which should not, and whether there is a role for vitamin K antagonists, low molecular weight heparin, and direct oral anticoagulants.

Health disparities are the focus of our Advances in IBS column. Dr Christopher V. Almario discusses racial/ethnic differences in irritable bowel syndrome (IBS) prevalence, symptoms, and health care seeking as well as socio-demographic and medical risk factors for IBS. He also discusses how race-gender interactions can affect health care utilization and spending in IBS, among other topics.

Finally, our Advances in IBD column reviews the influence of using different types of bowel anastomoses for ileocolonic resection in Crohn's disease. Dr Fabrizio Michelassi's discussion includes the different types of anastomoses currently being performed, what should be considered when choosing which type to use, complications that commonly occur, how anastomosis margins of resection should be determined, and research comparing different anastomoses.

I hope that you enjoy these articles and find them interesting and clinically useful.

Sincerely,

A handwritten signature in black ink that reads "Gary R. Lichtenstein". The signature is fluid and cursive, with a large, stylized initial "G".

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