

Sifting Through a Plethora of Stool Tests for Bacterial and Parasitic Gastrointestinal Infections



This month's issue of *Gastroenterology & Hepatology* features a practical guide on stool-based diagnostic testing for numerous bacterial and parasitic enteropathogens. As Dr Austin VonAxelson and Dr David J. Levinthal note in their feature article, it can be challenging to decide when microbial stool testing should be used and which test should be ordered. The authors review the current landscape of stool-based diagnostic options for common bacterial enteropathogens such as *Clostridioides difficile*, protozoal and parasitic organisms such as *Giardia duodenalis*, as well as less common organisms that may be found in special populations such as immunocompromised patients. Other topics of discussion include the importance of the patient's travel history when selecting a stool test, how to interpret a positive multiplex molecular panel result, and emerging challenges such as shifting epidemiologic patterns of infectious diarrhea.

Our other feature article this month focuses on the interleukin (IL)-23 inhibitor drug class in the setting of inflammatory bowel disease (IBD). Dr Tenzin Choden, Dr David Choi, and Dr Russell D. Cohen review clinical trial data on the IL-12/IL-23 inhibitor ustekinumab as well as the IL-23p19 inhibitors risankizumab, mirikizumab, and guselkumab. The authors also examine data from the few studies that have compared IL-23-specific agents with ustekinumab and discuss the safety of this drug class. Additionally, the authors discuss practical considerations such as the mode of administration, dosing frequency, and delivery systems for these agents as well as patient support programs.

Recent developments in hepatocellular carcinoma (HCC) surveillance are examined in our HCC in Focus column. Dr Nicole Rich discusses emerging tools such as abbreviated magnetic resonance imaging, contrast-enhanced or low-dose computed tomography, blood-based biomarker panels, and cell-free DNA methylation assays. Also discussed are the current use of the Liver Imaging

Reporting and Data System, the integration of artificial intelligence, and the shift toward risk-based surveillance.

Our Advances in IBD column, authored by Dr Laura E. Raffals, explores chronic antibiotic-dependent and -refractory pouchitis. She discusses relevant diagnostic testing, sequencing or combining of antibiotics, and the use of vancomycin in patients who also have primary sclerosing cholangitis. Her discussion also includes the use of different advanced therapies, whether fecal microbiota transplantation can play a role, and at what point surgery should be considered.

In this month's Advances in Hepatology column, Dr Veronica Loy discusses recent expansion of liver transplant indications. She discusses the use of liver transplant for colorectal liver metastases, including selection of transplant candidates, long-term survival, and posttransplant surveillance. Additionally, she discusses liver transplant for perihilar and intrahepatic cholangiocarcinoma as well as potential challenges of organ equity and scarcity with expanding indications, among other related issues.

Finally, our Advances in Endoscopy column highlights image-enhanced endoscopy (IEE) for detecting colorectal polyps. Dr Brian Jacobson discusses its potential benefits and key features, noting that the different IEE technologies on the market are areas of active research and evolving as they are used more in the field. He also discusses how IEE compares with white-light endoscopy and how he uses IEE in clinical practice.

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