Letter from the Chiefs

At the UCLA Division of Digestive Diseases we are strongly committed to unraveling the mysteries behind illnesses of the GI tract; translating knowledge gained from these studies into new and better treatments for individuals suffering from these ailments; and disseminating what we learn to the provider community to improve the care of these patients. This issue of *Beyond the Scope* underscores that commitment with a small sampling of the many ongoing activities in our Division.

As you can see beginning on the next page, the Division is well represented at Digestive Disease Week (DDW), the world’s largest and most prestigious meeting for GI professionals. Members of our Division will join approximately 15,000 physicians, researchers and academics who are converging in Chicago the first week of May to learn about the latest advances in the diagnosis, treatment and prevention of digestive disorders. We are excited to present on the research developments in our Division, but equally so about the prospect of gaining insights from our colleagues. We look forward to seeing you there.

We are a Division that aims to advance patient care through innovation, and one of the best examples of our innovative approaches can be found in the UCLA Center for Inflammatory Bowel Diseases, which is setting a new standard for chronic disease management through value-based strategies that view patients holistically and give them an active role in their care. Approximately 1.4 million people in the United States are affected by IBD, many of them seniors. On page 4, one of our new IBD Center physicians, Dr. Christina Ha, explains how to optimally care for IBD in the elderly. The addition of Dr. Ha is just one illustration of how the IBD Center is growing. Another is the establishment of a new advanced IBD fellowship program, through which the Center’s renowned leadership will train future generations of IBD clinicians and researchers (page 7).

We are bringing in new faculty in other parts of the Division as well, as the introduction to Drs. Vikas Pabby and Alireza Sedarat on page 6 attests. Elsewhere in this issue, Dr. Sedarat, part of our Interventional Endoscopy team, describes a challenging case in which a single-operator pancreatoscopy using the SpyGlass system was used to effectively treat a patient with chronic pancreatitis (page 2). The case shows yet again the value of going the extra mile to define new standards of care to relieve the suffering of patients with gastrointestinal diseases.
Beyond the Scope

Scott DR

Elizabeth A. Marcus, George Sachs, Yi Wen

Research Forum and impacts acid acclimation regulates expression of the urease gene cluster Helicobacter pylori


Continued on page 8
The case involved a 59-year-old male patient with a history of alcohol abuse who was referred to the division for evaluation of dilated bile and pancreas ducts, chronic pain and diarrhea, with the concern that the patient might have an underlying pancreas cancer. Endoscopic ultrasound found no tumor but showed many of the hallmarks of advanced chronic pancreatitis, including a dilated main pancreas duct and side branches, parenchymal calcifications and a significant number of intraductal stones.

Management of chronic pancreatitis is often challenging, notes Alireza Sedarat, MD, an interventional endoscopist in the UCLA Division of Digestive Diseases. “These patients are often in and out of the hospital with pain,” he says. “They may become dependent on narcotics or develop narcotic bowel syndrome, and many providers are often frustrated with the demands of their care. They have an increased risk of pancreatic cancer and can become quite ill with progressive disease.”

The UCLA team initially attempted to remove the stones via endoscopic retrograde cholangio-pancreatography (ERCP) with non-lithotripsy techniques, including stricture dilation and stenting. But these attempts were thwarted by the size of the patient’s stones and the complicated nature of the duct. The options at that point included major pancreatic surgery. “That is the traditional approach and it can range from removing part of the gland to removing all of the gland and transplanting islet cells,” Dr. Sedarat explains. “Additionally, drainage-type surgeries are widely used to split open the pancreas and connect it to the small bowel to improve the flow and get rid of the stones. Though effective for pain control, these tend to be major operations, and may have limited long-term durability – after five to seven years, some patients may have recurrent pain and at that point re-operating often is difficult. Also, some patients may not be good operative candidates to begin with because of other comorbid diseases.”

Endoscopic therapy offers an alternative to surgery. Dr. Sedarat notes that such an approach starts with an ERCP to enter the pancreas duct and determine the anatomy – including whether there are strictures related to scarring or stones in the duct, for example – before seeking to alleviate the pain by decreasing the pressure in the gland by dilating strictures, stenting, or removing stones, among other strategies. For patients who have many stones, as in this case, management is particularly challenging and there is a high complication and failure rate associated with endoscopic stone removal. “The anatomy of the pancreas tends to be more complex than the bile ducts,” Dr. Sedarat says. “There are side branches,
tortuosity of the duct and with the disease process there are often strictures that get in the way.” One alternative, extracorporeal shockwave lithotripsy followed by repeat ERCP to clear the fragmented stones, appears to be effective but is not commonly available in U.S. hospitals.

In the case of this patient, a decision was made to use intraductal lithotripsy under pancreatoscopic guidance. “We believe the logical approach is to be selective about which patients you send to surgery and to see whether the pain can be managed with other methods,” Dr. Sedarat explains. To perform the pancreatoscopy, the UCLA team employed the SpyGlass™ system, a single-operator narrow-caliber scope system that fits through the primary ERCP scope. An optical catheter passes through the SpyGlass™ system and enables direct visualization of the duct in question; lithotripsy devices, biopsy forceps or other instruments can then be passed through the device. The SpyGlass™ system was designed for evaluation and treatment of complex biliary disease, but is increasingly being applied to diseases of the pancreas such as chronic pancreatitis and IPMN (intraductal papillary mucinous neoplasm) at major centers such as UCLA, Dr. Sedarat notes.

The treatment approach proved successful – effective electrohydraulic lithotripsy and fragmentation of the pancreatic stones was followed by easy removal of the fragments. The patient responded well and is being managed expectantly, with significantly reduced pain. “Chronic pancreatitis is a disease that should be approached in a multidisciplinary way, and we are fortunate at UCLA to have a multidisciplinary conference every week to discuss these difficult cases with our colleagues from surgery and radiology,” says Dr. Sedarat. “This patient highlights the fact that just because a case is difficult doesn’t mean there aren’t options, especially if you have a team that is willing to think creatively about what can be done with minimally invasive techniques.”

Sequential images of endoscopic treatment of chronic pancreatitis. Left: Fluoroscopic view showing severe changes with stricture and stones. Middle: Pancreatoscopy with EHL probe in view after stone fragmentation. Right: After therapy with clearance of stones and dilation of stricture.

Alireza Sedarat, MD
Clinical Instructor of Medicine
Q&A: IBD Care in Older Patients

The aging U.S. population – it is projected that the number of Americans 65 and older will increase by 31% during this decade – ensures that there will be more older Americans affected with inflammatory bowel diseases (IBDs). The prevalence of inflammatory bowel disease (IBD) among older Americans is approximately 214 per 100,000 for Crohn’s disease and 315 per 100,000 for ulcerative colitis, based on the more recent population-based epidemiologic studies. However, approximately 10-15% of newly diagnosed inflammatory bowel disease occurs within this older age group. In addition, a sizable percentage of older Americans live alone, with limited income and social support.

Given that IBD is a chronic disease associated with increased morbidity and resource utilization, especially among older persons, tailored approaches that emphasize control of disease activity, preventative care, quality of life and safety are essential. Christina Ha, MD, a faculty member with the UCLA Center for Inflammatory Bowel Diseases, discusses optimal IBD care for these patients.

What special factors do physicians need to consider in the treatment of older persons with IBD?

Increasing age is an independent risk factor for serious infections, cancer, and mortality. In addition to the disease-specific symptoms such as increased diarrhea, bleeding, abdominal pain, and malnutrition/weight loss, there are features more unique to the older patient to consider, such as the loss of physical reserve associated with aging, functional status, decreased sphincter function, and susceptibility to falls, all of which affect the ability to handle increased disease burden. This often translates to greater health care utilization, including emergency department visits, hospitalizations, and ambulatory care visits, compared to younger patients.

Comorbidities are also more prevalent among older IBD patients. Increased comorbidity scores have been associated with greater risks of hospitalizations, infection, surgical complications, and mortality. Polypharmacy, typically defined as the use of five or more routine medications, is also very common among the older IBD patients, with associated increased likelihood of medication interactions. In a recent study, 43% of older IBD patients were taking 10 or more routine medications and 40% of these patients had at least one IBD drug-drug interaction. Medication complexity and burden can lead to greater non-adherence and therapy discontinuation. IBD medication regimens can be challenging for the older person to manage, with potentially high numbers of pills to take daily, medications that require frequent monitoring with routine laboratory evaluation, or injectable/infusion-based therapies. Simplification of regimens, including eliminating unnecessary or potentially inappropriate medications and decreasing overall pill burden and dosing complexity, may help decrease adverse effects, improve adherence and, potentially, improve therapeutic outcomes.

Chronic steroid use, malnutrition, hospitalization, and comorbidities are also risk factors for adverse events and are prevalent among older IBD patients experiencing IBD-associated complications. Delays in starting “appropriate” therapies, medication interactions, and surgical candidacy also factor into adverse event potential. Our current therapeutic algorithms do not consider these variables associated with aging, and there is little evidence-based guidance to assist with effective but safe medical vs. surgical decision-making for the older IBD patients.
**How well do older patients respond to IBD therapy?**

There are only a few studies that have examined therapeutic efficacy among older IBD patients, with mixed conclusions—some studies report similar efficacy compared to younger cohorts, while others report worse outcomes with greater medication discontinuation. Studies describing medication-prescribing patterns among older IBD patients suggest a greater reliance on medications to treat mild to moderate diseases, such as 5-aminosalicylates and steroids, regardless of disease activity. Chronic steroid use is not recommended for IBD patients regardless of age, due to the multitude of known adverse events. Older patients are particularly susceptible to steroid-related complications, including infections, diabetes, osteoporosis/fractures, and ophthalmologic complications such as glaucoma/cataracts.

Although steroid-sparing agents such as the biologics (e.g., anti-TNF agents) and thiopurines are used less frequently among older patients, the limited studies suggest a higher rate of adverse events (including infection, malignancy, and possibly mortality), with greater likelihood of discontinuation due to nonresponse. The increased risk of malignancy, particularly lymphoma and non-melanoma skin cancer, is particularly evident with thiopurine use (6-mercaptopurine and azathioprine) among older persons, especially with longer duration of therapy.

**How should the clinician manage the older IBD patient?**

Our current paradigms of managing IBD may need to be modified for older IBD patients based on features such as their overall health, the impact of the disease on quality of life and expected survival, with more consideration to the benefit-to-risk ratio for immunosuppressive therapies and goals of care. Prior to routine prescribing of steroids, immunosuppressants and biologics, we should consider their comorbidities, functional status, ability to self-administer medications and current polypharmacy. Older patients are likely to require more careful monitoring to assess treatment response and ensure earlier recognition of adverse effects. Preventative care programs are important, as many adverse effects may be preventable with routine health care maintenance including vaccinations, screening/surveillance exams and appropriate laboratory monitoring. Older patients are more likely to have multiple prescribing physicians; thus, adopting a guided care model with coordination across specialties, nursing/after-care coordinators, caregivers and home health services is needed to optimize quality of care.

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**References:**

UCLA Division of Digestive Diseases Welcomes Two New Faculty Members

**Vikas K. Pabby, MD, MPH | Clinical Instructor of Medicine**

Vikas Pabby, MD, MPH grew up in Southern California after which he went to Bangalore, India to attend medical school at MS Ramaiah Medical College. He subsequently completed his residency in Internal Medicine and Pediatrics at University of Southern California, LA County. He then worked as an Associate Physician in Internal Medicine at Brigham and Women’s Hospital in Boston, MA and was appointed Instructor of Medicine at Harvard Medical School, practicing full time internal medicine and part time pediatrics. Dr. Pabby then went on to pursue fellowship training in Gastroenterology and Hepatology at the Brigham and Women’s Hospital / Harvard Medical School Program. During the third year of fellowship, he was recognized for teaching and was awarded a fellowship-teaching award by the department of medicine. In addition, during his fellowship, Dr. Pabby obtained a Master’s in Public Health from the Harvard School of Public Health, Boston, MA.

As a recent graduate from fellowship, Dr. Pabby is board-certified in Gastroenterology, Internal Medicine and Pediatrics. He is a member of the American College of Gastroenterology, American Gastroenterology Association, the Crohn’s and Colitis Foundation of America and the American Society of Gastrointestinal Endoscopy. Dr. Pabby practices general gastroenterology with a particular interest in inflammatory bowel disease. His research interests include translational and clinical research in inflammatory bowel disease.

**Alireza Sedarat, MD | Clinical Instructor of Medicine**

Dr. Sedarat joined UCLA in 2013 as a member of the interventional endoscopy team and hemostasis group within the Division of Digestive Diseases. His clinical interests encompass the development and application of advanced endoscopic techniques and interventions to diagnose, stage, treat and palliate a range of benign and malignant gastrointestinal disorders. He is proficient in the application of advanced endoscopic techniques including therapeutic ERCP, EUS with fine needle aspiration and biopsy, ERCP in surgically altered anatomy, interventional EUS, pancreatic and biliary endotherapy, endoluminal stenting, endoscopic mucosal resection (EMR), complex polypectomy, tumor ablation, deep (device assisted) enteroscopy, endoscopic fistula and leak closure, complex stricture dilation and endotherapy, endoscopic treatment of Barrett’s esophagus with mucosal resection and radiofrequency ablation, Zenkers’ diverticulum myotomy and chromoendoscopy.

His research interests include endoscopic device development and application as well as evaluation of existing and emerging endoscopic technologies with a focus on improving patient outcomes. He is interested in the application of the emerging fields of endoscopic submucosal dissection (ESD) for early tumor resection and peroral endoscopic myotomy (POEM) for achalasia palliation. He will also be participating in new and ongoing research in GI bleeding in association with the CURE Hemostasis Research Group.

Dr. Sedarat completed his residency in Internal Medicine at the University of Pennsylvania. He completed his fellowship in Gastroenterology here at UCLA and returned to UPenn to complete an advanced endoscopy fellowship. He is board-certified in Gastroenterology and Internal Medicine and is a member of the American Society of Gastrointestinal Endoscopy, American College of Gastroenterology and American Gastroenterological Association.
The rapidly growing and groundbreaking UCLA Center for Inflammatory Bowel Diseases (IBD) within the Division of Digestive Diseases is offering a new advanced IBD fellowship position. The center has already begun recruiting candidates, and although the start date is flexible, the position can be filled as soon as July.

“We are delighted to introduce our inaugural IBD fellowship program at UCLA in 2014,” says Jennifer Choi, MD, the center’s associate director. “We envision this fellowship to be longstanding, furthering our commitment to training and educating future leaders in the IBD field.”

The advanced IBD fellowship position will be filled by an individual who has completed a three-year general gastroenterology fellowship and intends to specialize in the clinical management of Crohn’s disease and ulcerative colitis. The new fellow will have clinical responsibilities and perform innovative research in IBD. Dr. Choi notes that although the concept of an IBD fellowship is relatively new, a growing number of U.S. institutions are starting such programs because of the rich and varied opportunities that the extra year of dedicated subspecialty training affords.

“The management of IBD can be incredibly challenging,” Dr. Choi says. “This extra year of focused, in-depth training provides an opportunity for fellows to acquire the evidence-based knowledge and decision-making skills needed to manage complicated IBD patients with confidence. IBD fellows will have the chance to develop meaningful mentoring relationships and network with renowned doctors from within UCLA as well as other leading IBD centers. Fellows will also develop a myriad of research and administrative skills, so that they are well prepared to be expert leaders in the field.”

UCLA’s IBD fellows will gain a broad range of clinical and research experiences during their training, in both the inpatient and outpatient settings. They will be encouraged to use their fellowship year as an opportunity to apply for competitive research grants, pursue various multidisciplinary electives, and develop novel IBD research ideas and clinical programs. What distinguishes UCLA’s advanced IBD fellowship program and sets it apart from other fellowships is its unique focus on value-based healthcare for IBD, which not only emphasizes disease control, but also quality of life, productivity at work and school, and healthcare costs for patients. Trainees will be introduced specifically to the concept of the value quotient (VQ), which challenges conventional IBD care pathways by looking at patients holistically and giving them a more active role in their care.

For all of these reasons, Dr. Choi is confident UCLA will attract some of the nation’s most talented and dedicated clinicians, researchers and scientists to this unique training opportunity. “At our Center for Inflammatory Bowel Diseases we are placing a strong emphasis on not only patient and nursing education, but on training the leaders of tomorrow,” she says. “We want to invest in individuals who are committed to making a difference. By training such fellows, we will build a legacy of thought leaders who will make an impact and truly advance the field of IBD.”

Interested candidates are encouraged to apply for the advanced IBD fellowship position by contacting the UCLA Center for Inflammatory Bowel Diseases at ibdcenter@mednet.ucla.edu or by calling (310) 206-5403.
### MAY 3 (continued from page 1)

Sex commonalities and differences in BMI-related alterations in intrinsic brain activity and connectivity  
**Poster Session**

Lisa A. Kilpatrick, Arpana Gupta, Jennifer S. Labus, Joshua J. Istrin, Claudia P. Sanmiguel, Kirsten Tillisch, Emeran A. Mayer

The Development of e-Health Tools for the Management of Inflammatory Bowel Diseases  
**Poster Session**

Welmoed K. van Deen, Jennifer M. Choi, Aria Zand, Christina Y. Ha, Elizabeth K. Inserra, Laurin Eimers, Adriana Centeno, Bennett E. Roth, Daniel Cole, Terri Getzug, Ellen Kane, Lynn S. Connolly, Mark Osiowitcz, Andrew D. Ho, Martijn G. van Oijen, Eric Esrailian, Daniel W. Hommes

Uninvestigated Dyspepsia in the U.S. General Population: Results from the Rome Normative Gastrointestinal Symptoms Survey (RNGSS)  
**Poster Session**


**Poster Session**


### MAY 4

**Hands-on Stations**

Hands-on Workshops – Luminal Stenting and Ablation (HW4)  
Rabindra R. Watson

**Difficult problems in ERCP: a case-based approach**  
**Meet-the-Professors Luncheon**

HaluszkO, V. Raman Muthusamy

A Decision Analytic Markov Model to Evaluate the Health Outcomes for Sofosbuvir for Previously Untreated Patients and Those Without Treatment Options with Chronic Hepatitis C Virus Plenary Session  
**Sammy Saab**, Gordon SC, Park H, Ahmed A, Younossi ZM

**IBS and FODMAP**  
**ASGE/AGA Joint Presidential Plenary Session**

Lin Chang

For Peptic Ulcer Bleeding (PUB), Active Arterial Bleeding (Forrest 1A) has a Significantly Higher Risk of Rebleeding than Oozing Bleeding (Forrest 1B)  
**Topic Forum**

Dennis M. Jensen, Gordon V. Ohning, Thomas O. Kovacs, Kevin A. Ghassemi, Rome Jutabha, Machido GA, Dulai GS

Human gut microbial clusters correlate with anatomical brain signatures: a pilot study  
**ASGE/AGA Joint Presidential Plenary Session**


New Endoscopic Techniques  
**Topic Forum – Moderator and State-of-the-Art Lecture**

V. Raman Muthusamy

A Prospective, Multicenter Study Research the Aptitude of Trainees in Endoscopic Ultrasonography (RATE US STUDY) using Cumulative Sum Analysis (CUSUM)  
**Topic Forum**


Predictors of Complications from Radiofrequency Ablation (RFA) During Treatment of Barrett’s Esophagus: Results from the U.S. RFA Registry  
**Topic Forum**

Hathorn KE, Lightdale CJ, Wolf WA, Corbett FS, Pasricha S, Rothstein RJ, Cotton CC, Camara DS, V. Raman Muthusamy, Shaheen NJ

Abdominal surgery induced gastric ileus and activation of M1 macrophages in the gastric myenteric plexus: prevention by central vagal activation in rats  
**Research Forum**

Pu-Qing Yuan, Hiroshi Karasawa, Yvette Taché

Cathelicidin inhibits colitis associated colon cancer development by inhibition of epithelial-mesenchymal transition and cancer associated fibroblasts.  
**Research Forum**

Michelle Cheng, Samantha Ho, Jun Hwan Yoo, Kyriaki Bakirtzi, Yuzu Kubota, Ryan Ichikawa, Deanna H. Tran, Gallo R, Charalabos Pothisoulakis, Hon Wal Koon

Fulfillment of Quality Indicators (QIs) Predicts Length of Stay (LOS) in Patients with Acute Gastrointestinal Bleeding (GIB)  
**Research Forum**

Carl Nordstrom, Karsan SS, Mark W. Reid, Brennan M.R. Spiegel

In-vitro fertilization in women with inflammatory bowel disease is as successful as in women from the general infertility population  
**Research Forum**


Protein kinase D1 (PKD1) regulates the accumulation of the second messenger phosphatidylinositol (3,4,5)-trisphosphate in intestinal epithelial cells.  
**Research Forum**

Yang Ni, James Sinnen-Smith, Steven H. Young, Heloisa P. Soares, Enrique Rozengurt

A Decision Analytic Markov Model to Evaluate the Health Outcomes of Sofosbuvir for Previously Untreated Patients and Those Without Treatment Options with Chronic Hepatitis C Virus  
**Poster Session**

Sammy Saab, Gordon SC, Park H, Ahmed A, Younossi ZM

Attitudes and Practices Regarding Type II Sphincter of Oddi Dysfunction (SOD): A Comparative Survey Study of Expert Biliary Endoscopists and Referring Gastroenterologists  
**Poster Session**

Rabindra R. Watson, Shah JN, Komanduri S, Klapman JB, Wani S, V. Raman Muthusamy

Cirrhosis Regression in Hepatitis C Patients with Sustained Virologic Response after Anti-Viral Therapy: A Meta-analysis  
**Poster Session**

Sammy Saab, Manne V, Akhtar E

Creation of a Prediction Tool (M-PACT) to Accurately Identify Premalignant and Malignant Cyts in Patients Undergoing Endoscopic Ultrasound (EUS) for Evaluation of Pancreatic Cystic Lesions: Results from a Large Multicenter Cohort  
**Poster Session**

Cross talk between somatostatin receptor subtype 2 (sst2) and corticotropin releasing factor receptor 1 (CRF1) signaling pathways in the rat colon: functional implications 
Poster Session
Pu-Qing Yuan, Yvette Taché

Effects of alternative xeno-free media formulations on the functional characteristics of IFN-γ-primed human Bone Marrow and Adipose derived Mesenchymal stem cells
Poster Session
Angelos Oikonomopoulos, Welmoed K. van Deen, Daniel W. Hommes

Global DNA Methylation Analysis in Irritable Bowel Syndrome
Poster Session
Swapna M. Joshi, Christos Polytarchou, Dimitrios Illiopoulos, DeYoung J, Emeran A. Mayer, Lin Chang

Grey matter alterations in medial prefrontal cortex show negative associations with subjective reports of worry in IBS patients
Poster Session

Impaired miRNA regulation as molecular cause of altered 5-HT4 receptor signalling in irritable bowel syndrome
Poster Session

Intestinal cathelicidin level indicates inflammatory bowel disease activity and mediates anti-inflammatory effects in colitis.
Poster Session
Samantha Ho, Michelle Cheng, Shih DQ, Vu M, Tressia Hing, Yuzu Kubota, Ryan Ichikawa, Deanna H. Tran, Gallo R, Targan S, Charalabos Pothoulakis, Hon Wai Koon

Intracerebroventricular urocortin 1-induced anorexia involves peripheral α2 adrenergic receptor mediated inhibition of ghrelin in rats: prevention by rikkunshito
Poster Session
Yakabi K, Ochiai M, Ro S, Hosomi E, Hayashi K, Ohno S, Harada Y, Hattori T, Lixin Wang, Yvette Taché

Interobserver Agreement Between Trainers and Trainees: Results from a Multicenter Study Evaluating Learning Curves and Competency in ERCP
Poster Session

Opioid Receptor Activation Protects Against Intestinal Ischemia-Reperfusion Injury in Mice Through Different Pathways During Early and Late Phase of Reperfusion.
Poster Session
Duraffourd C, Tsui J, N Brecha, Catia Sternini

Prevalence and Characteristics of Previously Undetected (Surprise) Colorectal Cancer in Colectomy Specimens among Patients with Inflammatory Bowel Disease
Poster Session
Eluri S, Parian AM, Limketkai BN, Christina Y. Ha, Montgomery EA, Lazarev M

Prevalence of infant/toddler functional gastrointestinal disorders in the U.S.: Results of a national community survey of mothers
Poster Session

Renal transplantation threshold in patients with hepatitis C liver fibrosis and cirrhosis: a decision analysis model.
Poster Session
Gina Choi, Lee KG, Wu C, Sammy Saab

Repeated Water Avoidance Stress Induces Sex and Regional-Dependent Alterations in Rats Colonic Epithelial Function
Poster Session
Muriel H. Larauche, Ganna Tolstanova, Mandy Biraud, Mulugeta Million, Yvette Taché

State of trainee inflammatory bowel disease education in the United States: A national survey
Poster Session
Bewtra M, Christina Y. Ha, Ananthakrishnan AN, Rieder F, Cohen BL

The CIC-2 Chloride Channel Agonist, Lupidostone, Prevents Ileal Epithelial Permeability Alterations in a Murine Model of Diarrhea-Dominant Irritable Bowel Syndrome
Poster Session
Ganna Tolstanova, Muriel H. Larauche, Pu-Qing Yuan, Yvette Taché

The Development and Evaluation of Coordinated Care Pathways for Inflammatory Bowel Diseases
Poster Session
Welmoed K. van Deen, Jennifer M. Choi, Elizabeth K. Inserna, Laurin Emers, Ellen Kane, Mark Ovsiovitch, Adriana Centeno, Martijn G. van Oijen, Bennett E. Roth, Daniel Hollander, Wendy Ho, Daniel Cole, Terri Getzug, Lynn S. Connolly, Andrew D. Ho, Christina Y. Ha, Eric Esrailian, Daniel W. Hommes

Treating Chronic Hepatitis C Infection in the Elderly: Estimated Impact on Life Expectancy
Poster Session
Zhou K, Ferguson J, Elashoff D, Sammy Saab

Vasoactive intestinal peptide (VIP) is involved in intraperitoneal corticotropin-releasing factor (CRF) induced diarrhea in rats
Poster Session
Seiichi Yakabi, Lixin Wang, Hiroshi Karasawa, Koike K, Yakabi K, Yvette Taché

MAY 5

All-Cause Mortality in Patients with Barrett’s Esophagus Undergoing Radiofrequency Ablation: Results from the U.S. RFA Registry
Distinguished Abstract Plenary
Pasricha S, Triadafilopoulos G, Li N, V. Raman Muthusamy, Wolf WA, Chmielewski GW, Cotton CC, Corbett FS, Camara DS, Shaheen NJ

Multivariate pattern analysis identifies diffusion tensor imaging-based brain signatures that accurately discriminate irritable bowel syndrome patients from healthy controls
Distinguished Abstract Plenary
Jennifer S. Labus, Van Horn JD, Arpana Gupta, Torgerson C, Cody Ashe-McNalley, Cathy Liu, Irimia A, Kirsten Tillisch, Emeran A. Mayer

What the Physician Innovator Needs to Know
Committee Sponsored Symposium
V. Raman Muthusamy

Architecture of anatomical brain networks differs in irritable bowel syndrome compared to healthy controls
Research Forum
Jennifer S. Labus, Van Horn JD, Torgerson C, Arpana Gupta, Cody Ashe-McNalley, Cathy Liu, Bruce D. Naliboff, Kirsten Tillisch, Emeran A. Mayer

Catecholaminergic Genetic Polymorphisms are Associated with Autonomic Nervous System (ANS) Function in Irritable Bowel Syndrome
Research Forum
Alexa C. Orand, Shih W, Tiffany Ju, Presson AP, Nuwanthi Heendeniya, Emeran A. Mayer, Bruce D. Naliboff, Lin Chang
Functional dyspepsia in children: Can we distinguish epigastric pain and postprandial distress? Research Forum

Genes and IBS—Is there a pattern to the puzzle? Research Forum
Lin Chang

Mucosal Bitter Taste Receptor Expression In Overweight And Obese Subjects Research Forum

Prevalence of child/adolescent functional gastrointestinal disorders in a national U.S. community sample Research Forum

Serrated epithelial change is associated with a longer time to dysplasia in patients with chronic ulcerative colitis Research Forum
Parian AM, Limketkai BN, Christina Y. Ha, Montgomery EA, Lazarev M

Scheduled unsedated colonoscopy is an effective approach to manage no shows and cancellations due to lack of escorts required for conscious sedation. Topic Forum

Tenofovir (TDF) Monotherapy is Comparable to Tenofovir and Entecavir (TDF+ETV) Combination Therapy as Rescue Therapy for Patients with Partial Response to ETV: A Multicenter Study Topic Forum
Lu L, Trinh HM, Pan CQ, Steven-Huy B. Han, Wong CC, Li J, Chan S, Wong C, Nguyen MH

Addressing Low Colorectal Cancer Screening in African Americans: Focus Groups Reveal Insights for Developing an Effective Intervention Poster Session
Folasade P. May, Cynthia B. Whitman, Ksenia Varlyguina, Erica G. Bromley, Bibiana M. Martinez, Brennan M.R. Spiegel

Autoimmune pancreatitis is associated with aggressive IBD Poster Session
Parian AM, Afghani E, Limketkai BN, Jain A, Christina Y. Ha, Singh VK, Lazarev M

Dissociation of GPCR-stimulated DNA synthesis from dephosphorylation of YAP at Ser-127. Poster Session
Jia Wang, Ming Ming, Yang Ni, James Sinnett-Smith, Enrique Rozengurt

Identification of a novel stimulus-dependent phosphorylation in the N-terminal region of protein kinase D1 (PKD1) in intestinal epithelial cells. Poster Session
Yang Ni, James Sinnett-Smith, Enrique Rozengurt

Illness Perceptions and Coping Predict Quality of Life and Work Productivity in IBD Patients with Arthroplasty: A 12-Month Prospective Study Poster Session

Laparotomy and intraoperative enteroscopy for severe obscure gastrointestinal bleeding before and after the era of video capsule endoscopy and deep enteroscopy Poster Session
Manatsathit W, Dennis M. Jensen, Hines OJ, Thomas O. Kovacs, Gordon V. Ohning, Rome Jutabha, Kevin A. Ghassemi, Dulai GS, Machicado GA

Rikkunshito improves post-operative gastric ileus and meal pattern in rodents Poster session
Linix Wang, Seiichi Yakabi, Hiroshi Karasawa, Yakabi K, Koike K, Yvette Taché

Should Serum Ferritin be used as a Predictive Marker for Colonic Neoplasia in Patients with Iron Deficiency Anemia? Poster Session
Aung Kaung, Brian L. Huang, Claudia P. Sanmiguel, Stanley K. Dea, Brennan M.R. Spiegel

Development and Validation of PRISM: A Patient Reported Outcome Measure for GERD Patients who are Partial or Non-Responders to PPI Therapy Poster Session

A glove-based, disposable, point-of-service device which allows detailed physiological assessment of the anorectum: A proof of concept study in healthy volunteers. Poster Session

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Irritable Bowel Syndrome
Meet-the-Professor Luncheons
Lin Chang

ASGE Video Forum
Moderator
Kevin Ghassemi

Celiac Disease
Clinical Symposium
Brennan M.R. Spiegel

Medicinal Therapies: Low Dose Naltrexone and Cannabis in IBD
Clinical Symposium
Christina Y. Ha

Communication with the Patient in Era of HER Committee Sponsored Symposium
Lin Chang

A Multicenter Prospective Randomized Controlled Cross-over Trial Comparing Endoscopic Ultrasound (EUS)-Guided Fine Needle Aspiration (FNA) and Fine Needle Biopsy (FNB) For Pancreatic and Non-Pancreatic Masses Topic Forum

Fine Needle Biopsy (FNB) is More Cost-Effective Than Fine Needle Aspiration (FNA) for Endoscopic Ultrasound Guided Tissue Sampling: An Economic Analysis Topic Forum
Wani S, V. Raman Muthusamy, Komanduri S, Rabindra R. Watson, Shah JN, Klapman JB, Das A

Fecal Incontinence (FI) Prevalence and Associated Gastrointestinal Risk Factors in the U.S. General Population Research Forum

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Irritable Bowel Syndrome (IBS) Prevalence in the U.S. General Population: Results from the Rome Normative Gastrointestinal Symptoms Survey (RNGSS)
Research Forum

Development and Validation of a Disease-Targeted Quality of Life Instrument for Chronic Diverticular Disease: the DV-QOL
Research Forum

Predicting mucosal inflammatory activity in Crohn’s disease: a new, validated non-endoscopic disease activity index
Research Forum

State of the Art: Diverticular Disease
Research Forum
Brennan M.R. Spiegel

A comparison of endoscopic visualization of the upper GI tract using linear echoendoscopes vs. gastroscopes: a prospective multicenter cohort study
Poster Presentation

A Novel Algorithm for Predicting Patient Absenteeism for Gastroenterology Procedures
Poster Session

Berberine potently activates AMPK and inhibits mTORC1, ERK and cell cycle progression of human pancreatic cancer cells in vitro and reduces the growth of human pancreatic cancer xenografts in vivo
Poster Session
Ming Ming, Jia Wang, James Sinnett-Smith, Steven H. Young, Enrique Rozengurt

Clostridium Difficile infection and acute alcoholic hepatitis: The associated risk, mortality, and health care utilization
Poster Session
Sundaram V, Folasaide P. May, Vignan Manne, Sammy Saab

Detailed Analysis of Predictors for Surgical Resection in Patients with Pancreatic Cystic Lesions Undergoing Endoscopic Ultrasound with and without Fine Needle Aspiration: Results from a Large Multicenter Cohort Study
Poster Session

Diagnostic Accuracy of Carcinoembryonic Antigen (CEA) in Cyst Fluid Analysis in Histologically Confirmed Pancreatic Cysts: Results from a Large Multicenter Cohort Study
Poster Session

Doppler Endoscopic Probe (DEP) as a Guide to Risk Stratification & Prophylaxis to Prevent Delayed Post-polypectomy Induced Ulcer (PPIU) Hemorrhage after Polypectomy
Poster Session
Dennis M. Jensen, Gordon V. Ohning

Establishment of a novel automated method to assess the food intake microstructure in rats
Poster Session

IBD-associated effects of fat-derived mediators in the regulation of adiponectin receptor 1 (AdipoR1) in human colonocytes
Poster Session
Aristea Sideri, Shih D, Fleshner P, Arsenescu R, Turner JR, Charalabos Pothislakis, Iordanes Karagiannides

Identification of a novel protein kinase D1 (PKD1)/RIN1 axis in pancreatic cancer cells
Poster Session
Guha S, James Sinnett-Smith, Enrique Rozengurt

Inhibition of corticotropin-releasing hormone receptor 2 (CRHR2) expression in colorectal cancer correlates with tumor growth and EMT in vitro and in vivo, poor patient survival and increased risk for distant metastases.
Poster Session

MicroRNA-4284 regulates CXCL5 expression and is down-regulated in colon tissues of pediatric patients with ulcerative colitis
Poster Session

Neurotensin (NT) through the regulation of microRNA (mir)-210 promotes the development of colitis and intestinal angiogenesis.
Poster Session
Kyraki Bakirtzi, Ivy Ka Man Law, Christos Polytarchou, Daniel W. Hommes, Dimitrios Iliopoulos, Charalabos Pothislakis

Patients with irritable bowel syndrome show sex related differences in resting-state functional connectivity
Poster Session
Jui-Yang Hong, Jennifer S. Labus, Lisa A. Kilpatrick, Jean Stains, Nuwanthi Heenendiyana, Suzanne R. Smith, David Katibian, Kirsten Tillisch, Emeran A. Mayer

PKD1-mediated class IIa histone deacetylase phosphorylation and nuclear/cytoplasmic shuttling in intestinal epithelial cells
Poster Session
James Sinnett-Smith, Yang Ni, Ming Ming, Steven H. Young, Enrique Rozengurt

Relationship of microbial serology and luminal microbiome composition in Crohn’s Disease
Poster Session
Gati Goel, Tong M, Li XX, Baron G, Targan S, McGovern DP, Braun J

Role of corticotropin-releasing hormone 2 in mucosal healing during colitis
Poster Session
Jill M. Hoffman, Stavroula Baritaki, Jonathan J. Ruiz, Aristeia Sideri, Charalabos Pothislakis

Suppression of the mTOR/P13K pathway promotes ERK pathway activation in human pancreatic cancer cells
Poster Session
Soares HP, Ming Ming, Michelle Mellon, James Sinnett-Smith, Enrique Rozengurt

The role of genetic variation and C-reactive protein (CRP) in inflammatory bowel disease
Poster Session
The UCLA Division of Digestive Diseases continues to be rated in the top ten among digestive diseases centers in the United States by *U.S.News & World Report* in its annual survey.