Novel Technology, Integrative Medicine and Unique Partnerships Benefit Patients at the New Robert G. Kardashian Center for Esophageal Health
A MESSAGE FROM THE CHIEF

Going **Beyond the Scope**

The UCLA Vatche & Tamar Manoukian Division of Digestive Diseases has a focus on the key missions of patient care, research, and education, and it is because of a commitment to these areas that we and our UCLA Health colleagues have been able to excel over the year. We aim to provide state-of-the-art, compassionate care to patients across a range of conditions. We conduct research that advances the way these conditions are understood, diagnosed, treated, and prevented. We provide training that prepares the next generation of clinicians and scientists in the field of gastroenterology and hepatology. Finally, we form partnerships with our colleagues from the medical school, the health system, across our entire university, our broader community in Southern California – and beyond – to ensure that we are reaching the populations that can benefit from our expertise. This issue of Beyond the Scope highlights developments that exemplify our continued growth and excellence in these critical areas.

The establishment of the Robert G. Kardashian Center for Esophageal Health (page 2) represents a major milestone for our division. Thanks to the generous support of members of the Kardashian family in honor of their late father, we are striving to form the most comprehensive multidisciplinary center for treating esophageal disorders – ranging from significant quality of life conditions such as gastroesophageal reflux disease (GERD) to life-threatening esophageal cancer – to better care for our patients around the world. Of equal importance, the Kardashian Center epitomizes our division’s commitment to providing holistic, patient-centered care aimed at improving overall health and well-being by also utilizing dietary modification and complementary approaches. That commitment is now formalized in our groundbreaking Integrative Digestive Health and Wellness Program, which is featured on page 4.

As the other articles in this issue attest, the outstanding care provided by the clinicians who are part of our Melvin and Bren Simon Digestive Diseases Center is delivered in parallel with the other critical pillars of the division. The world-class scientific work by our research faculty constantly informs and improves the care we deliver – including, for example, efforts to detect liver cancer at an earlier, more treatable stage through an inexpensive blood test (page 8), the development and testing of potential new drugs that would be the first to effectively address the visceral pain in irritable bowel syndrome – a condition that affects up to 20% of U.S. adults (page 9), and the study of effective, personalized nutritional strategies for patients with inflammatory bowel disease (page 6). Furthermore, the mentorship and training from within our division, and in collaboration with other academic units at UCLA, ensures a constant infusion of outstanding physicians-scientists, two of whom are featured on page 10. Our commitment to the health of our patients also dictates that we should not necessarily wait for them to come to us: Our division’s leadership in the unprecedented campaign by UCLA Health to increase colorectal cancer screening rates (page 7) is a striking example of the important work of our faculty taking place outside the clinics and research labs to reach members of the community locally, nationally, and internationally.

Finally, on page 1, we pay tribute to the individual who set the stage for all of the above. After 25 years as division chief, during which he oversaw a period of remarkable growth and tremendous impact in patient care, research, teaching, and community service, Dr. Gary Gitnick is now serving as chief emeritus. As just one of countless individuals who have been deeply affected by his counsel and moved by his example, I know I speak for the entire division in expressing our gratitude to Dr. Gitnick for leadership that continues to make an impact on people’s lives in immeasurable ways.

**Eric Esrailian, MD, MPH**  
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Beyond the Scope

Bennett Roth, MD, remembers the first time he met Gary Gitnick, MD. Dr. Roth, who had just completed his medical residency and military service in Norfolk, Virginia, had ventured west to interview for gastroenterology training at UCLA.

“Gary was the first person I met,” Dr. Roth recalls. “And I was so impressed by him that even though I already had a fellowship arrangement at the University of Pennsylvania, I decided on UCLA.”

That was in 1972. By the time Dr. Roth finished his training, he could still count the number of faculty in what would become the UCLA Vatche & Tamar Manoukian Division of Digestive Diseases on one hand. Today, the division has approximately 80 full-time faculty members and 100 employees, making it among the largest academic gastroenterology divisions in the world.

Much of that growth was overseen by Dr. Gitnick, who served as chief of the division from 1993 to 2018. Dr. Gitnick has now retired from administrative responsibilities, but he has a recall appointment and continues to see patients as chief emeritus.

“Gary Gitnick’s leadership over more than two decades helped the Division of Digestive Diseases become the best in the world,” observes Alan Fogelman, MD, chair of the Department of Medicine at the David Geffen School of Medicine at UCLA, of which the division is part. “His work will continue to benefit the lives of many for decades to come.”

After earning his MD at the University of Chicago Pritzker School of Medicine and completing his residency and gastroenterology subspecialty training at the Mayo Clinic, he spent three years as a research associate at the National Institutes of Health. Dr. Gitnick joined the UCLA faculty in 1969. He would become chief of staff at UCLA Medical Center, medical director of the UCLA Health Care Programs and, starting in 1993, chief of a division he would take to unprecedented heights.

During his career, Dr. Gitnick also produced more than 300 publications and authored or edited 64 books on gastroenterology and hepatology. However, one of his greatest passions involved his work outside of UCLA – most notably as founder and chairman of the board of The Fulfillment Fund, a nonprofit organization that provides college-access programs, mentoring, and college scholarships to more than 2,000 students each year from educationally and economically under-resourced communities.

“Helping people in need and creating opportunities for all has always been a priority for Gary,” says Dr. Roth, who served as chief of clinical affairs for the division under Dr. Gitnick’s leadership and is currently also a professor emeritus. “He has done this by creating The Fulfillment Fund to help disadvantaged youth in L.A. and making it the mission of the division to provide exceptional patient care through scientific discoveries and compassion.”

Eric Esrailian, MD, MPH, the division’s current chief, says Dr. Gitnick’s dedication to assisting youth toward reaching their potential has been mirrored at UCLA, where Dr. Gitnick has had a pivotal impact on numerous careers – including Dr. Esrailian’s.

“Dr. Gitnick has played the role of mentor to a whole generation of physicians and scientists at UCLA and across the nation,” Dr. Esrailian says. “He encourages mentees to build on their strengths, but also to challenge and stretch themselves to achieve both personal and professional success. As one of those mentees, I know that his support and guidance have inspired me to always aim for the next level and to strive to achieve maximum impact for my community.”

As Division Chief from 1993 to 2018, Dr. Gary Gitnick Left An Enduring Legacy
New Robert G. Kardashian Center for Esophageal Health Provides Multidisciplinary, Patient-Centered Care

Combining holistic, patient-centered, state-of-the-art therapies with cutting-edge research and efforts to raise awareness of the causes and treatment of esophageal disease, the UCLA Robert G. Kardashian Center for Esophageal Health has been established within the Vatche & Tamar Manoukian Division of Digestive Diseases. The new center – named in memory of Robert G. Kardashian, a prominent Los Angeles attorney who died of esophageal cancer in 2003 – was celebrated during Esophageal Cancer Awareness Month in April, at a campus event attended by the family and other friends of the university. Kardashian’s family also announced it would launch fundraising efforts to provide resources for the center’s key initiatives and activities.

“For the first time at UCLA, we will have a concentrated effort and resources to provide care for patients who suffer from esophageal or motility disorders, ranging from benign conditions that impact quality of life such as gastroesophageal reflux, to devastating life-and-death conditions such as esophageal cancer,” says Eric Esrailian, MD, MPH, chief of the division and a longtime friend of the Kardashian family. “By honoring their father, the Kardashians have also helped us establish a center that will raise awareness about these conditions, the different treatment options, and the potential to improve on available therapies – to work toward preventing these diseases in the future. In addition, entrepreneur, beauty mogul and producer Kim Kardashian West, one of Robert Kardashian’s daughters, is the division’s newest ambassador.

Dr. Esrailian notes that the new center will leverage the Melvin and Bren Simon Digestive Diseases Center’s gastroenterologists and UCLA Health’s collective expertise in surgery, oncology, otolaryngology, anesthesia, radiology, pathology and pediatrics to gain new insights into the causes of esophageal disorders and develop new prevention and treatment strategies. The center will draw patients from throughout the region and around
Beyond the Scope

the world for expert treatment of some of the most complex esophageal conditions, to benefit from the center’s motility expertise, and to participate in research and receive promising new therapies through clinical trials. The center also provides outstanding care for common esophageal conditions.

“This is the first multidisciplinary and collaborative effort of its kind to take care of patients across the spectrum of esophageal disorders,” says Jeffrey L. Conklin, MD, medical director of the Kardashian center. “By bringing all of these disciplines together, the center promotes interactions that ensure that patients are getting the best possible attention to their condition, in a streamlined way that allows them to see all of the appropriate experts on the same visit.”

Beyond the multidisciplinary medical and surgical expertise, the new center provides patients with a more holistic approach to treatment than medicine has traditionally offered. Working in conjunction with the division’s new Integrative Digestive Health and Wellness Program, the center brings in GI dietitians to optimize nutritional strategies, a GI health psychologist who can apply evidence-based principles to improve symptoms by influencing the brain-gut connection, and an integrative health nurse practitioner and certified mindfulness teacher who can work with patients on mind-body approaches to enhancing wellness. “There is not always one right way to treat a particular condition – each patient is different,” says Kevin Ghassemi, MD, the center’s associate director of clinical programs. “Our goal is not just to diagnose and treat disease, but to optimize health. Having all of these resources allows us to do that.”

Dr. Ghassemi notes that esophageal conditions run the gamut from gastroesophageal reflux disease (GERD) to esophageal cancer, and from rare disorders to common ones such as eosinophilic esophagitis (an allergic condition in which food can get stuck in the esophagus); achalasia (a swallowing disorder); and Barrett’s esophagus (an irritation in the esophageal lining caused by chronic reflux). Rates of esophageal cancer have increased dramatically in recent years; Dr. Ghassemi explains that this is likely due to increases in the incidence of GERD, the most common esophageal disorder and a major esophageal cancer risk factor.

With few symptoms, esophageal cancer often goes undetected but is treatable if caught early, especially with the most innovative approaches – most notably endoscopic techniques to remove the early cancer, potentially avoiding the need for surgery and/or chemotherapy. Patients with chronic GERD or other risk factors for esophageal cancer – including smokers, people who are significantly overweight and those with a family history – may benefit from having screening endoscopies for Barrett’s esophagus, which can be a precursor to esophageal cancer, Dr. Ghassemi says.

Approximately 5% of chronic GERD patients go on to develop Barrett’s esophagus, and about 10% of those patients will develop dysplasia. These patients are treated effectively through endoscopic therapy, and the field is now moving toward being able to predict which Barrett’s esophagus patients without dysplasia will develop the pre-cancerous condition so that these patients can be treated before they get to that point, notes V. Raman Muthusamy, MD, a clinical professor in the division and medical director of endoscopy for UCLA Health. This would also provide reassurance to people who are at low risk for developing dysplasia and cancer.

Interventional endoscopy has become the preferred procedure for diagnosing and treating many GI conditions that once required surgery, and the interventional endoscopy team at the Kardashian center will continue to blur the boundaries while improving on the endoscopy’s diagnostic and therapeutic capabilities, Dr. Muthusamy says. For example, peroral endoscopic myotomy (POEM), the endoscopic equivalent to surgery for esophageal motility disorders such as achalasia, achieves comparable outcomes. “With endoscopy we are increasingly able to improve both our diagnostic and therapeutic capabilities in minimally invasive ways – often combining them in a single procedure,” Dr. Muthusamy notes. “That ability will continue to improve.”

The state-of-the-art care provided at the center will be advanced by the research enterprise within the division, throughout the UCLA Health system and across the UCLA campus. In conjunction with UCLA’s new Institute for Precision Health, the center is leveraging advances in genetic studies, data science and information technology to develop personalized approaches to health promotion and treatment. The center is also an integral part of the UCLA Value-Based Care Consortium, which uses research to design strategies for improving the quality and outcomes of care while reducing cost.

Dr. Esrailian stresses that as the new center begins to recruit more staff and faculty to join the effort, more exciting developments lie ahead. “We hope the Kardashian family’s commitment inspires even more support from our community of friends – positioning the Robert G. Kardashian Center as a leader in the prevention, diagnosis and treatment of esophageal conditions,” Dr. Esrailian says. “This is just the beginning.”
Amid mounting evidence of the powerful connection between the mind and the gastrointestinal tract — much of it pioneered by researchers in UCLA’s Vatche & Tamar Manoukian Division of Digestive Diseases — the division has established the Integrative Digestive Health and Wellness Program, where a team of experts works collaboratively to enhance each patient’s overall health and well-being.

Based within the Melvin and Bren Simon Digestive Diseases Center at UCLA, the program includes not only the gastro-enterologists who manage each patient’s care, but also a GI nurse practitioner and mindfulness teacher with expertise in the brain-gut axis and mind-body approaches, registered dietitians with expertise in digestive health, and a GI health psychologist who specializes in the use of evidence-based psychological treatments to reduce symptoms and improve coping and psychological adjustment.

“In medicine there is a growing recognition of the value of taking a holistic approach to enhancing health — an approach that is tailored to individual patients’ needs and goals, and that recognizes the importance of nutrition, stress, and other lifestyle factors in their overall health and well-being,” says Lin Chang, MD, vice chief of the division. “By working together in an integrative fashion to meet each patient’s needs, we strive to achieve the best possible outcomes not only for each patient’s digestive health, but also for their overall well-being.”

The holistic, patient-centered approach is particularly important for people with chronic gastrointestinal illnesses or symptoms, Dr. Chang says, given the well-established connection between the brain and the gut as well as the critical role of diet in digestive health. She notes that the brain and the enteric nervous system — sometimes referred to as the “second brain” in the gut — communicate back and forth in ways that influence both mental and physical health.

“This is why when we are stressed we often feel it in the gut, and why people with anxiety or depression often have abnormal gastrointestinal function,” Dr. Chang says. “It is also why conditions once classified as functional gastrointestinal disorders, including irritable bowel syndrome, chronic constipation and chronic abdominal pain, are now understood to be rooted in altered brain-gut interactions.”

The Integrative Digestive Health and Wellness Program has embraced evidence-based dietary, behavioral, and integrative health strategies and offers them as part of a comprehensive approach to the care of patients with gastrointestinal disorders. Suzanne Smith, MSN, NP, a nurse practitioner with extensive experience in clinical care and research in gastrointestinal disorders and brain-gut interactions, also has special training in mind-body approaches and is a certified mindfulness teacher. As an integrative health practitioner, Smith’s goal is to empower patients to actively engage in their health through practical health-promoting behaviors and mindfulness-based interventions that have been shown to reduce stress and decrease symptoms.
“The integrative health practitioner provides tools and strategies for symptom management as well as health enhancement – promoting sleep, fitness, stress management, resilience and self-care, all personalized into a care plan for the patient’s condition, goals and lifestyle,” explains Smith, who is also instrumental in ensuring that the entire integrative health team works together in a coordinated manner.

While proper nutrition is vital to everyone’s health, it is a critical factor for patients with a gastrointestinal condition, many of whom suffer discomfort, pain and other debilitating symptoms that are exacerbated by the foods they eat, which in turn can affect their psychological well-being. “The internet and news media put out a barrage of information about the pros and cons of various diets, foods and nutritional supplements, much of which is either conflicting or not based on solid science,” says Nancee Jaffe, MS, RDN, chief dietitian with the Integrative Digestive Health and Wellness Program. “As a result, by the time many patients come to us, they are confused, frustrated, or both.”

Because the program’s registered dietitians exclusively see patients with digestive problems, they are able to work in tandem with the other integrative team members to offer practical, evidence-based dietary strategies suited to each patient’s specific condition and lifestyle. Often, Jaffe notes, these strategies not only help to reduce symptoms, but also provide patients with a much-needed sense of control over their health.

Many patients with gastrointestinal conditions can also benefit from working with Christina T. Gentile, PsyD, MA, who as the program’s GI health psychologist is specially trained in applying evidence-based psychological treatments to influence the brain-gut connection and improve patients’ symptoms and well-being. “For some patients, GI symptoms are worsened by stress, while for others, the stress of managing the symptoms can contribute to emotional distress and a significant impairment in quality of life,” Dr. Gentile notes. “When patients are referred to me by their gastroenterologist, I work with them to develop a treatment plan based on their goals, and together with their physician, we implement that plan in a way that addresses their symptoms and promotes a meaningful and fulfilling life while managing their condition.”

Among the evidence-based psychological treatments Dr. Gentile employs are cognitive behavioral therapy (CBT), which examines the role of thoughts and behaviors in the expression of GI symptoms to develop new approaches for symptom management and stress resilience; acceptance and commitment therapy, a mindfulness-based behavioral therapy designed to assist the patient with living in ways consistent with personal values while developing psychological flexibility to support adjustment; and medical hypnosis, a form of relaxation training that uses imagery and positive suggestion to lower stress arousal and calm the digestive tract.

Dr. Chang notes that UCLA’s Integrative Digestive Health and Wellness Program is at the forefront of a new approach to managing patients with GI conditions – one that recognizes the importance of not simply treating the digestive tract, but also looking at the whole person and developing a comprehensive approach to enhancing health through a multidisciplinary team of experts. “Our integrative health team is dedicated to providing individualized, patient-centered care grounded in the latest knowledge about digestive health, the brain-gut connection and strategies for improving the health and quality of life of patients who are experiencing these conditions,” Dr. Chang says. “We help patients identify the approach that is best for them, then work as partners to help them achieve the best possible outcome.”
Dr. Berkeley Limketkai Joins IBD Center as Director of IBD Clinical Research

Berkeley Limketkai, MD, PhD, a gastroenterologist and clinical researcher with a special interest in the role of nutrition and the gut microbiome in inflammatory bowel disease (IBD), has joined the Vatche & Tamar Manoukian Division of Digestive Diseases as a health sciences associate clinical professor of medicine and director of IBD clinical research for the UCLA Center for Inflammatory Bowel Diseases. In that role, Dr. Limketkai is building the IBD center’s clinical research infrastructure and forging collaborations with researchers within and outside the center, as well as seeing IBD patients in the clinic.

Nutrition will be one of the main areas of focus for the IBD clinical research program, Dr. Limketkai says. “Patients with IBD often have alterations in their diet and nutritional status, and there is great interest in better understanding the role nutrition plays in influencing symptoms and disease activity, and vice versa,” he explains. There are minimal data about nutrition’s impact on IBD, Dr. Limketkai notes, but enough to suggest that it could be a fruitful area of investigation. Exclusive enteral nutrition, a liquid formula-based diet, has been shown to be effective in reducing inflammation in IBD. “We also know that diet directly influences the microbiome composition, and we believe the microbiome plays a contributing role in the development of IBD and possibly disease activity,” Dr. Limketkai adds.

Research at the center will examine how IBD changes nutritional status, how nutrition influences the development of symptoms, and how these factors are mediated by the microbiome. The clinical research program at the IBD center will also continue to investigate the role of the brain-gut axis in IBD, including how mental and emotional health and psychology affect disease symptoms, and vice versa.

Another theme will broadly involve clinical outcomes and health services research. “We want to identify the factors that contribute to favorable or unfavorable outcomes in IBD as a way of improving the quality of care we provide,” Dr. Limketkai says.

Dr. Limketkai earned his MD from the University of Cincinnati, then completed his internal medicine residency, gastroenterology fellowship, and PhD education at Johns Hopkins University, and further pursuing advanced training as the Theodore M. Bayless Fellow in Inflammatory Bowel Diseases at Johns Hopkins and clinical nutrition training through the Nestlé Nutrition Institute. His doctoral dissertation explored the role of vitamin D in IBD pathogenesis and severity.

“Dr. Limketkai’s background in clinical and nutritional research adds great strength to our program,” says Jenny Sauk, MD, director of clinical care for the UCLA Center for Inflammatory Bowel Diseases. “In addition to leading the clinical research effort, he will provide expertise on complex cases, as well as helping our center bridge the needs of community practices given the growing complexity of IBD care. We are very excited to have him in our program.”
Public Campaign, System-Level Changes Aim to Improve Colorectal Cancer Screening Rates at UCLA

The UCLA Vatche & Tamar Manoukian Division of Digestive Diseases and the Department of Medicine at the David Geffen School of Medicine at UCLA are spearheading an ambitious initiative throughout the UCLA Health system to improve the rates of colorectal cancer screening. The two-pronged effort includes a public-facing campaign to raise awareness among UCLA Health patients and employees of the importance of being screened, as well as a system-level quality improvement initiative aimed at providers and staff. It has already yielded positive results — UCLA Health saw a 6.1% increase in screening rates between July 2018 and July 2019 — along with national acclaim from the American College of Gastroenterology, which recently honored the UCLA Health team with four 2019 SCOPY awards in recognition of its community engagement, education and awareness efforts for colorectal cancer prevention. The UCLA Health Colorectal Cancer Screening Campaign also received a Gold Award for Best Integrated Campaign from the eHealthcare Leadership Awards, which recognizes the best websites and digital communications of health care organizations.

The U.S. Centers for Disease Control and Prevention estimates that nearly one-third of adults ages 50-75 are not up to date on their screening. To address this concern, the National Colorectal Cancer Roundtable has set a goal of reaching 80% colorectal cancer screening rates. “At UCLA, we recognized that we were below the benchmark and that our rates could be improved,” says Folasade May, MD, PhD, MPhil, an assistant professor in the division who has led the effort in conjunction with Maria Han, MD, chief quality officer for the Department of Medicine.

Last March, coinciding with national Colon Cancer Awareness Month, UCLA Health launched its first-ever month-long public awareness campaign targeting UCLA Health patients, providers and employees. Activities included community lectures on colon health, community health fairs, and events on the UCLA campus, including an inflatable colon walk-through tunnel. “The idea was to make people feel more comfortable talking about a subject that is typically uncomfortable,” Dr. May explains.

A critical part of the campaign involved social media engagement. In addition to daily postings on the colorectal cancer campaign activities and materials throughout the month, UCLA patients shared their experiences with screening or treatment for colorectal cancer via UCLA Health social media platforms. The effort drew more than 23 million Twitter chat impressions and more than 300,000 Facebook/Twitter/Instagram impressions; it also featured partnerships with celebrities including Kareem Abdul-Jabbar, Tyra Banks, and Maria Menounos.

The ongoing system-level efforts to improve colorectal cancer screening uptake at UCLA Health came out of a workgroup consisting of experts in clinical medicine, quality improvement, population health, medical informatics, and health services research. The group identified a number of interventions designed to engage providers and front-line staff in both primary care and gastroenterology clinics. One of the key areas of focus has been designing standard workflows to ensure that patients who are due for screening don’t leave their appointments without ordering or scheduling their test. The process for ordering screening tests on the electronic health record has been streamlined, and the group launched an evaluation and improvement project around a program to mail the fecal immunochemical test (FIT) to patients who opt for that screening form.

“This is a national public health concern,” Dr. Han says. “We know that colon cancer is the second-leading cause of cancer death in the U.S., and that more than half of those deaths are likely preventable through appropriate screening. Our goal is to generate awareness around colorectal cancer screening among the general public as well as to engage and activate providers and frontline staff to improve screening rates in their clinics.”
With a five-year, $3.5 million grant from the National Cancer Institute, Steven-Huy Han, MD, director of the Hepatology Clinical Research Center, has joined with colleagues in the UCLA Department of Pathology & Laboratory Medicine on an ambitious effort to develop an effective and affordable blood-based method for the early detection of liver cancer. The so-called “liquid biopsy” would sample for cancer cell-free DNA that could appear in high-risk patients’ blood months or even years before a tumor could be detected by ultrasound — enabling earlier and potentially more successful treatment.

The grant establishes the UCLA Center for the Early Detection of Liver Cancer, part of the national Translational Cancer Consortium to study early detection of hepatocellular carcinoma. The center includes translational and clinical researchers with multidisciplinary expertise in the areas of early detection, biomarkers, cancer surveillance, imaging, and bio-repositories. It is led by Jasmine Zhou, PhD, who developed the technology. Co-principal investigators include Dr. Han, who is collecting serum and following patients clinically; and Samuel French, MD, PhD, a pathologist who is evaluating patients’ tissues.

The study focuses on circulating tumor DNA (ctDNA) in the blood, which carries cancer-specific genetic and epigenetic aberrations. The diagnostic test the center is seeking to validate is based on the DNA methylation patterns of ctDNA, using integrated computational and experimental technologies. “This is a new kind of methylation assay developed by Dr. Zhou that can detect tumor cells in the blood potentially much sooner than we would be able to detect the cancer otherwise,” Dr. Han explains.

For the study, the researchers are focusing on patients at risk for developing liver cancer, including those with cirrhosis who are waiting on a transplant list, as well as at-risk hepatitis B patients. Dr. Han is monitoring these patients through ultrasound screening and collecting their blood samples every six months, banking it as part of a biospecimen repository that includes plasma from individuals in the cohort as well as tissue from liver tumors after resection, and cirrhotic lesions after liver transplantation. For the patients who go on to develop liver cancer, Dr. Zhou will evaluate their earlier blood samples to determine when tumor cell-free DNA were first detected with the newly developed assay. UCLA and the other centers in the national consortium are sharing their technologies and findings in an effort to jointly arrive at an effective blood test to detect liver cancer at an earlier stage.

“Our current method with patients at risk for developing liver cancer is to do liver ultrasounds at least twice a year, but it’s very hard to pick up a tumor that is smaller than one centimeter from by ultrasound, so it is usually well established by the time we detect it,” Dr. Han says. “We are hoping these new biomarkers will tell us that a cancer has developed months, if not years, before it would even be evident on ultrasound. In addition, a non-invasive blood test in the future would be much less expensive and more accessible, especially in under-resourced populations and under-resourced countries.”
A research team in UCLA’s CURE: Digestive Diseases Research Center is joining with La Jolla, California-based Sentia Medical Sciences, Inc. on a two-year, National Institutes of Health (NIH)-funded Phase II study to investigate and validate the use of small peptides that target the visceral pain in irritable bowel syndrome (IBS). The two-year, $2 million grant, awarded through NIH’s National Institute of Diabetes and Digestive and Kidney Diseases, will test drug candidates in rodent models of chronic IBS. The preclinical studies are being led by Muriel Larauche, PhD, an associate adjunct professor in the laboratory of Yvette Taché, PhD. Dr. Taché and Lin Chang, MD, both professors in the UCLA Vatche & Tamar Manoukian Division of Digestive Diseases and members of CURE, are also involved in the study.

IBS, a functional GI disorder that affects up to 20% of U.S. adults, is characterized by recurrent abdominal pain and altered bowel habits (constipation, diarrhea, or both). “It is a significant quality of life problem for patients, and currently the available IBS drugs mainly treat the motility symptoms,” Dr. Larauche says. “We don’t have good drugs to target the pain.” Stress is known to play a major role in the onset, maintenance, and exacerbation of IBS symptoms.

Dr. Taché’s lab has been a pioneer in research on how stress affects the brain-gut axis. Among other things, her team has found, in studies going back decades, that the gastrointestinal tract response to stress is mediated by corticotropin-releasing factor (CRF), which is secreted in a nerve-specific region of the brain’s hypothalamus. More recently, researchers in Dr. Taché’s lab have shown that selective non-peptide CRF receptor antagonists reduce the stress-related changes occurring in the gut, including pain and motility. But these impressive preclinical results did not translate clinically, Dr. Larauche notes.

Now, the team has partnered with Sentia, founded by Jean Rivier, PhD, a long-time collaborator of Dr. Taché, which has developed small peptides that target the CRF system. “These appear to be very promising in their ability to block the changes related to the stress response, and they have the additional advantage of being long-acting,” Dr. Larauche says. The current Phase II study follows a six-month Phase I grant in which the same researchers showed that the peptides are efficient in blocking visceral sensitivity. Now, the researchers hope to go further by showing that in rodent models of IBS, they can prevent visceral pain and diarrhea. As part of the grant, the Sentia researchers are conducting pharmacokinetics and toxicity studies to ensure the peptides’ safety.

“Pain continues to be one of the most problematic concerns facing the IBS population,” Dr. Larauche says. “We are hopeful that our research will show that these CRF receptor antagonists can have a therapeutic effect by preventing or modulating visceral pain, leading to clinical trials and ultimately better medications for these patients.”
STAR Program Alumni Embark on Their Careers as Clinician-Scientists

Two of the newest members of the UCLA Vatche & Tamar Manoukian Division of Digestive Diseases faculty are taking advantage of their unique preparation as clinician-scientists through the David Geffen School of Medicine at UCLA’s STAR (Specialty Training and Advanced Research) program. Drs. Noam Jacob and Elizabeth J. Videlock are building on the research they began as part of STAR, which helps to meet the national need for physicians pursuing investigative careers. STAR combines clinical fellowship or residency training with advanced research training – in the cases of Drs. Jacob and Dr. Videlock, leading to a PhD.

“The STAR program allowed me to have a significant amount of protected research time, which is so critical,” Dr. Jacob says. “The program stresses the importance of finding the right mentors, with the idea that in this field it’s almost like an apprenticeship – there’s only so much you can learn by reading papers and taking courses. You need to learn from people who have been successful. STAR also taught us how to communicate our research effectively, whether in the form of written papers and grants, posters and oral presentations, or the ‘elevator pitch’ of summing it up in non-technical terms.”

Dr. Jacob studies the mechanisms of inflammatory bowel disease (IBD) – in particular, how molecules known as cytokines influence both inflammation and fibrosis in the disease process. Although medications that target cytokines in IBD are effective in reducing inflammation, there are no agents that effectively treat the intestinal fibrosis. “The challenge is to identify molecules that are responsible for fibrosis, and/or other aspects of the pathway that could be targeted for treatment,” Dr. Jacob explains.

Beginning with his STAR PhD research, Dr. Jacob has focused on TL1A, a cytokine that has been shown to cause both inflammation and fibrosis in IBD. “Patients with Crohn’s disease are genetically predisposed to overproducing TL1A, and those patients have been shown to develop strictures and scars in their intestines,” Dr. Jacob notes. Using animal models that overproduce TL1A, his focus is to determine the mechanisms by which TL1A promotes fibrosis – knowledge that could lead to new strategies to successfully intervene.

Starting with his PhD thesis, Dr. Jacob has looked at fibroblasts – the cells TL1A acts on that have been shown to promote fibrosis – and, separately, he has studied which parts of the microbiome conspire with TL1A to cause fibrosis. In collaboration with Jonathan P. Jacobs, MD, PhD, an assistant professor in the division, he showed in the mouse model that when the mice are not exposed to normal gut bacteria, they don’t develop fibrosis or inflammation, even though they are overproducing TL1A. “That tells us that you need the gut flora to cause this TL1A-mediated effect,” Dr. Jacob says.
Next, they showed that reintroducing a certain population of bacteria reestablishes the fibrosis in these mice. Based on that finding, they identified several bacterial candidates that correlated with the fibrosis in the TL1A-overproducing mice and are now conducting further analyses on the mechanisms involved. “The potential is that in conjunction with targeting TL1A, we might be able to eliminate harmful organisms or enrich for beneficial organisms,” Dr. Jacob notes. “This is an emerging feature in the treatment of inflammatory diseases – a multipronged approach rather than the use of a single agent.”

Dr. Videlock has had a longtime interest in the brain-gut axis and has published extensively in the field of irritable bowel syndrome. Her current research, which she started in the STAR program, seizes on emerging evidence on the role of the gut in Parkinson’s disease. It has been known that in people with Parkinson’s, the same build-up of abnormal protein deposits known as Lewy bodies that occur in the brain is found in the gut. Recently, though, studies in animal models have suggested that this pathology could travel from the gut to the brain. “There had been a hypothesis for a while that the gut could be a site of initiation of Parkinson’s disease, and now there is stronger evidence for that, although it’s still controversial,” Dr. Videlock notes. “This would be exciting, because this is a slow-developing disease and if it can be detected in the gut before it reaches the brain, that would open the door to treatment that would prevent symptoms from developing.”

Whether or not Parkinson’s originates in the gut, it is indisputable that people with the disease experience gastrointestinal symptoms. “It is definitely a disease of the gut-brain axis,” Dr. Videlock says. “It’s also a disease for which we have good experimental tools, and there are outstanding opportunities for collaboration with the neurologists and neuroscientists at UCLA. Studying the gut aspect of Parkinson’s could lead to important developments, because it’s difficult to study the brain in living humans.” In addition, she notes, research has shown an increased prevalence of Parkinson’s disease in patients with inflammatory bowel disease.

Dr. Videlock is currently examining the role of inflammation in the gut-brain axis in Parkinson’s. As part of a pilot feasibility study funded by the division’s CURE: Digestive Diseases Research Center, she is working with a mouse model that overexpresses the protein that causes Parkinson’s disease. Dr. Videlock is currently analyzing the brain and colon tissue of the mice at two different time points to assess the inflammation-related changes. “I hope to identify both gastrointestinal biomarkers for the disease and gut-specific mechanisms that are part of the pathogenesis,” she explains.

Dr. Videlock, like Dr. Jacob, says the key to her training as a clinician-investigator was the protected research time STAR provided. “STAR invests in giving you the time to educate yourself, develop your techniques, and acquire the technical and cognitive skills that you need in order to succeed,” she says. “And unlike traditional MD/PhD programs where you start your PhD before doing any clinical work, we have already had that experience and figured out what we are interested in based on our work as doctors. Biomedical research needs clinician investigators because we come with a different perspective. It can be hard for clinicians to succeed in research, but STAR provides the ideal preparation.”
New Clinical Faculty Members

Nimah Ather, MD | Health Sciences Clinical Instructor of Medicine
Dr. Ather earned her undergraduate degree in biology and psychology at Saint Louis University. She continued at Saint Louis University through medical school as part of the combined eight-year BA/MD Medical Scholars Program and is a member of the Alpha Omega Alpha Honor Society. She came to Los Angeles and completed both her internal medicine residency and gastroenterology fellowship at UCLA.

Dr. Ather practices general gastroenterology with special interest in inflammatory bowel disease. During her fellowship, she was awarded a position in the Crohn’s and Colitis Foundation Visiting Inflammatory Bowel Disease Program, where she underwent additional training at the University of Chicago Inflammatory Bowel Disease Center. She is board-certified in internal medicine and GI-board eligible and a member of the American College of Gastroenterology.

Daniel Eshtiaghpour, MD | Health Sciences Clinical Instructor of Medicine
Dr. Eshtiaghpour attended UCLA as an undergraduate psychobiology major. He graduated from Jefferson Medical College in Philadelphia and completed his internship and residency in internal medicine at Harbor UCLA Medical Center. He trained in gastroenterology UCLA. During his fellowship, he did research with Dr. Dennis Jensen, associate director of CURE: Digestive Diseases Research Center, looking at outcomes, prognosis and risk factors for hematochezia in colon cancer and polyps.

Dr. Eshtiaghpour is board-certified in internal medicine and gastroenterology, and is a member of the American Gastroenterology Association and American Association for the Study of Liver Diseases.

Craig Gluckman, MD | Health Sciences Clinical Instructor of Medicine
Dr. Gluckman received his medical degree from the University of the Witwatersrand in Johannesburg, South Africa. Following a year of internship and community medical service, he completed his internal medicine residency through the College of Physicians in South Africa. Prior to relocating to the United States, Dr. Gluckman worked as an internist in private practice for several years.

After relocating to New York City, Dr. Gluckman completed his residency in internal medicine and fellowship in gastroenterology at Mount Sinai Beth Israel Hospital in New York. He went on to pursue additional training at the University of Pennsylvania, completing a further fellowship in esophageal and swallowing disorders. During his training, Dr. Gluckman developed a particular interest in esophageal and gastrointestinal motility disorders.

Dr. Gluckman is board-certified in internal medicine and gastroenterology, and is a member of the American Neuro-Gastroenterology and Motility Society.

Chun X. Hsu, MD | Health Sciences Clinical Instructor of Medicine
Dr. Hsu graduated with honors from the University of Michigan, Ann Arbor with a bachelor of science in biology. He received his doctor of medicine degree from Tufts University School of Medicine in Boston and completed his residency training in internal medicine at McGaw Medical Center of Northwestern University in Chicago. He completed his gastroenterology fellowship at the University of Michigan Hospitals in Ann Arbor in 2007. Dr. Hsu was in private practice in Kansas City, Missouri before moving to California to join UCLA.

Although he has conducted research and published papers on esophageal and gastric motility disorders, Dr. Hsu also has an interest in general gastroenterology, hepatology and biliary and pancreatic diseases. He is board-certified in internal medicine and gastroenterology.
Danny Issa, MD | Health Sciences Clinical Instructor of Medicine

Dr. Issa is an interventional gastroenterologist with advanced fellowship training. His clinical and research interest focus on using minimally-invasive approaches to the diagnosis and treatment of digestive diseases such as the pancreas and biliary tract disorders, achalasia, Barrett’s esophagus, gastroparesis, colon polyps and early cancer lesions. Gastrointestinal procedures he performs include ERCP, therapeutic EUS, tumor ablation, endoluminal stenting, EMR, ESD and peroral endoscopic myotomy (POEM). He has a particular interest in bariatric endoscopy and obesity medicine and performing non-surgical endoscopic procedures for weight loss such as endoscopic sleeve gastroplasty (ESG) and gastric balloon placement. Dr. Issa has presented his research at numerous national meetings.

After earning his medical degree from the University of Damascus, he completed a postdoctoral research fellowship at Northwestern University, Chicago, and a residency in internal medicine at Cleveland Clinic - Fairview Hospital. He then completed a fellowship in gastroenterology and hepatology at Virginia Commonwealth University and an advanced endoscopy fellowship at Weill Cornell Medical College/New York-Presbyterian Hospital. Dr. Issa is board-certified in gastroenterology and internal medicine. He is an active member of the American Society for Gastrointestinal Endoscopy, American Gastroenterology Association, American Association for the Study of Liver Diseases and the American College of Gastroenterology.

Parastoo Jangouk, MD | Health Sciences Clinical Instructor of Medicine

Dr. Jangouk received her medical degree with honors from Tehran University of Medical Sciences. After medical school, she completed research fellowships at Heinrich-Heine University in Dusseldorf, Germany and Johns Hopkins School of Medicine where she authored several manuscripts. She then moved to Pittsburgh to attend University of Pittsburgh Medical Center (UPMC) for her internship and residency in internal medicine. She went on to pursue her fellowship in gastroenterology and hepatology at Yale University School of Medicine. During her fellowship, she worked with Dr. Garcia-Tsao, chief of Digestive Diseases at the VA Connecticut Healthcare System, on research developing non-invasive tools to diagnose cirrhosis.

Dr. Jangouk is a member of the American College of Gastroenterology and the American Society for Gastrointestinal Endoscopy. She is also board-certified in internal medicine and gastroenterology.

Lisa D. Lin, MD, MS | Health Sciences Clinical Instructor of Medicine

Dr. Lin received her bachelor and master of science degrees in cellular and molecular biology from Johns Hopkins University. She earned her medical degree from UCSF, and then completed her internship and residency in internal medicine at Mount Sinai Hospital. She subsequently completed her fellowship training in gastroenterology at UCLA. During her fellowship, she completed an American Neurogastroenterology and Motility Society clinical training program in gastrointestinal motility and neurogastroenterology at the University of Michigan.

Dr. Lin has particular interests in gastrointestinal motility, functional gastrointestinal disorders (including irritable bowel syndrome, chronic constipation and functional dyspepsia) and fecal material transplantation. She speaks both English and Mandarin and is board-certified in internal medicine and gastroenterology. She is a member of the American Gastroenterological Association and the American College of Gastroenterology.
Robert Mocharla, MD | Health Sciences Clinical Instructor of Medicine

Dr. Mocharla received his undergraduate degree in biology from the University of Texas at Austin. He earned his medical degree from New York University School of Medicine while also serving as school president. He remained at NYU to complete his residency in internal medicine as a chief resident and his fellowship in gastroenterology. During his fellowship, he was awarded a position in the Crohn's and Colitis Foundation Visiting Inflammatory Bowel Disease Fellow Program, where he underwent additional training at the University of California, San Francisco Colitis and Crohn's Disease Center.

Dr. Mocharla is board-certified in internal medicine and gastroenterology, and is a member of the American College of Gastroenterology, American Gastroenterological Association, and the Crohn's and Colitis Foundation.

Didi Mwengela, MD | Health Sciences Clinical Instructor of Medicine

Dr. Mwengela graduated from Stanford University with a bachelor of science in biological sciences and a minor in Spanish. She earned her medical degree from the University of California, Irvine and completed a residency in internal medicine at the University of Southern California. Following her residency, Dr. Mwengela completed a clinical fellowship in gastroenterology at the University of New Mexico.

Dr. Mwengela is board-certified in internal medicine and gastroenterology and, a member of the American Gastroenterological Association, American College of Gastroenterology, and American Society for Gastrointestinal Endoscopy.

Mona Rezapour, MD, MHS | Health Sciences Clinical Instructor of Medicine

Dr. Rezapour attended University of California, Berkeley and graduated with a major in molecular environmental biology. She then completed her masters of health sciences in reproductive and cancer biology at Johns Hopkins Bloomberg School of Public Health. She earned her medical degree from Johns Hopkins University School of Medicine and completed her internship and residency in internal medicine at the University of Southern California. She then completed her fellowship in gastroenterology at California Pacific Medical Center in San Francisco. Following her fellowship training, she moved to Florida to complete an advanced fellowship in Inflammatory Bowel Disease (IBD) at the University of Miami.

Dr. Rezapour is actively involved in gastrointestinal societies with leadership roles in American Society of Gastroenterology's women's committee and American Gastroenterology Association education universe editorial board. She is board-certified in both internal medicine and gastroenterology.

Dr. Rezapour’s clinical research interests during training focused on diverticular disease and epidemiological aspects of inflammatory bowel diseases.

Tina R. Storage, MD | Health Sciences Clinical Instructor of Medicine

Dr. Storage attended the University of Southern California on a Trustee Scholarship. She graduated summa cum laude with a double major in neuroscience and biology and a minor in public health. She earned her medical degree from the UCLA David Geffen School of Medicine and is a member of the Alpha Omega Alpha Honor Society. She completed her internship and residency in internal medicine at Stanford University, and returned to UCLA to complete her fellowship in gastroenterology, where she served as chief fellow and received the Compassionate Care Award. Her research interests include colorectal cancer prevention and colorectal cancer screening adherence. She is currently involved in a research study at the West Los Angeles VA evaluating the impact of digital patient navigation programs on colonoscopy completion.

Dr. Storage speaks both English and Farsi. She is board-certified in internal medicine and GI-board eligible. She is a member of the American Gastroenterological Association and the American College of Gastroenterology.
Adarsh M. Thaker, MD | Health Sciences Clinical Instructor of Medicine

Dr. Thaker is a member of the UCLA interventional endoscopy service. His clinical practice and research focus on the use of the latest endoscopic technologies for the diagnosis and treatment of gastrointestinal disorders. He has specialized training in eradication therapies for Barrett’s esophagus and early esophageal cancer; stricture dilation; ERCP; cholangioscopy; endoluminal stent placement; deep enteroscopy/balloon enteroscopy; EMR of large polyps; endoscopic suturing, fistula and leak closure; endoscopic weight loss therapies; and EUS for cancer staging, fine needle aspiration and biopsy and interventional. In addition, Dr. Thaker has recently focused on eliminating endoscope-related infections to improve patient safety.

Dr. Thaker completed his undergraduate training in chemical engineering at UCLA before attending medical school at New York Medical College. He completed his internal medicine residency training at Beth Israel Deaconess Medical Center and Harvard Medical School in Boston, followed by gastroenterology fellowship and advanced endoscopy fellowship training at UCLA.

Dr. Thaker is board-certified in gastroenterology and internal medicine. He has published several research studies, literature reviews and a textbook chapter related to the endoscopic management of complex gastrointestinal diseases, anesthesia safety during endoscopy and preventing infections related to endoscopic instruments. He is a member of the American Society of Gastrointestinal Endoscopy, the American College of Gastroenterology and the American Gastroenterological Association. He also serves on the committee for the AGA's Center for GI Innovation and Technology, which supports innovation and the development of new technologies for use in gastroenterology, hepatology, nutrition and obesity management.

Priyam V. Tripathi, MD, MPH | Health Sciences Clinical Instructor of Medicine

A native Californian, Dr. Tripathi attended the University of California, San Diego where she received her bachelor of science in animal physiology and neuroscience, with a minor in psychology. She then earned a master of public health degree with epidemiology concentration from Boston University, and was inducted into the Delta Omega honor society. She worked at the Memorial Sloan-Kettering Cancer Center on clinical trial coordination. Dr. Tripathi went on to receive her medical degree from Rush University Medical College in Chicago, and completed internal medicine residency at Case Western Reserve University Hospitals in Cleveland. She then returned to California to complete her gastroenterology fellowship at the University of California, Irvine, where she received the fellowship research award for her research examining the use of artificial intelligence to aid in the detection of colon polyps.

She is board-certified in internal medicine and gastroenterology, and a member of the American Gastroenterological Association, American College of Gastroenterology, and the American Society for Gastrointestinal Endoscopy.

Kara Walter, MD | Health Sciences Clinical Instructor of Medicine

Dr. Walter earned her medical degree from Weill Cornell Medical College and completed her internship and residency in internal medicine at the University of Washington School of Medicine. She remained at the University of Washington for additional fellowship training in gastroenterology and transplant hepatology. She is board-certified in internal medicine and board-eligible in gastroenterology and transplant hepatology.

Dr. Walter specializes in general and transplant hepatology. She treats patients with a wide spectrum of liver disorders, including non-alcoholic fatty liver disease, viral hepatitis, autoimmune liver diseases, cirrhosis of the liver and its complications, and hepatocellular carcinoma. She also cares for patients both before and after liver transplantation. Her research interests include management of hepatic encephalopathy and outcomes of liver transplantation.
UCLA-Mellinkoff Gastroenterology and Hepatology Symposium

Improving Digestive Health via a Case-Based Approach
The Beverly Hilton, Beverly Hills, CA
March 6-7, 2020

14.75 AMA PRA Category 1 Credits™ — 14.75 ABIM MOC Points
Up to 17.5 CE Contact Hours, 16.9 Hours are ABCGN GI-specific Hours
$375 / $300 / $50 Registration — Course #M190-22

The 8th Annual UCLA-Mellinkoff Gastroenterology and Hepatology Symposium is designed to offer healthcare professionals novel and integrative approaches to treat common GI disorders that can easily be implemented into practice and have significant impact on patient outcomes. Interactive, lively case presentation and video sessions by UCLA gastroenterology and hepatology experts and other renowned physicians will engage attendees and enhance this learning experience.

Registration and Course Information
Go to www.cme.ucla.edu/courses or email TrishaJames@mednet.ucla.edu

Overnight Accommodations
A limited block of rooms, at a special rates of $289-$319 + tax has been reserved. To receive this rate, you must make your reservation before the room block is filled and by the expiration date of February 13, 2020. To reserve a room, call (310) 285-1307 and ask for UCLA Mellinkoff or make a reservation online at: https://book.passkey.com/go/95b7d3ba
For more information about the hotel, visit www.beverlyhilton.com

Non-CME — Hands-On Session — Open to All Attendees
The hands-on session will provide a valuable learning opportunity, though no accredited hours will be issued for this portion.

Course Director
V. Raman Muthusamy, MD, MAS
Medical Director of Endoscopy
UCLA Health
Professor of Clinical Medicine
Vatche and Tamar Manoukian
Division of Digestive Diseases
David Geffen School of Medicine
at UCLA

Course Co-Director
Eric Eysralian, MD, MPH
Chief, Vatche and Tamar Manoukian
Division of Digestive Diseases
Director, Melvin and Bren Simon Digestive Diseases Center
Lincy Foundation Chair in Clinical Gastroenterology
Health Sciences Associate Clinical Professor of Medicine
David Geffen School of Medicine at UCLA

Accreditation

CME Credits
The Office of Continuing Medical Education, David Geffen School of Medicine at UCLA is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The Office of Continuing Medical Education, David Geffen School of Medicine at UCLA designates this live activity for a maximum of 14.75 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in this activity.

ABIM MOC
Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to 14.75 Medical Knowledge and Practice Assessment MOC points in the American Board of Internal Medicine’s (ABIM) Maintenance of Certification (MOC) program. Participants will earn MOC points equivalent to the amount of CME credits claimed for this activity. It is the CME activity provider’s responsibility to submit participant completion information to ACCME for the purpose of granting ABIM MOC credit.

CE Contact Hours
Provider approved by the California Board of Registered Nursing, Provider Number 12511 for 8 contact hours for participation in day 1 and 9.5 contact hours for participation in day 2.

ABCGN
According to the criteria of the American Board of Certification for Gastroenterology Nurses (ABCGN), 16.9 hours earned in this activity are considered GI-specific for the purpose of recertification by contact hours through ABCGN.
### Friday, March 6

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<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Presenter(s)</th>
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<tr>
<td>7:00 am</td>
<td>Registration and Breakfast</td>
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<tr>
<td>7:50 am</td>
<td>Welcoming Remarks</td>
<td>Eric Esrailian, MD, MPH</td>
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<tr>
<td>7:55 am</td>
<td>Course Overview</td>
<td>V. Raman Muthusamy, MD, MAS</td>
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<tr>
<td>8:00 am</td>
<td>Esophageal Disorders</td>
<td>Jeffrey L. Conklin, MD</td>
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<td>8:15 am</td>
<td>An Interactive Case-Based Discussion</td>
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<td>10:00 am</td>
<td>Liver Disorders</td>
<td>Beshoy T. Yanny, MD, UCLA</td>
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<td>10:20 am</td>
<td>Hepatitis C: The Gift that Just Keeps on Giving</td>
<td>Sammy Saab, MD, MPH</td>
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<td>10:40 am</td>
<td>Hepatitis B: Practical Approach for the Clinician</td>
<td>Steven-Huy Han, MD, MD</td>
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<td>11:00 am</td>
<td>Treatment of Refractory Ascidis</td>
<td>Mohamed El Kabany, MD</td>
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<td>11:20 am</td>
<td>Autoimmune Hepatitis and Primary Biliary Cholangitis</td>
<td>Gina Choi, MD, MD</td>
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<tr>
<td>11:40 am</td>
<td>Challenging Patient Cases and Q &amp; A</td>
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<tr>
<td>12:10 pm</td>
<td>Lunch</td>
<td>V. Raman Muthusamy, MD, MAS</td>
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<tr>
<td>12:20 pm</td>
<td>Functional Bowel Disease</td>
<td>lin Chang, MD, MD</td>
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<tr>
<td>3:00 pm</td>
<td>Panel</td>
<td>Raymond K. Cross, Jr., MD, MD, Mona Rezapour, MD, MD, David T. Rubin, MD</td>
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<tr>
<td>3:40 pm</td>
<td>Adjourn</td>
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<td>4:30 pm</td>
<td>Non-CME – Hands-On Session – Open to All Attendees</td>
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### Saturday, March 7

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<td>An Interactive Case-Based Discussion</td>
<td>lin Chang, MD, MD</td>
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<tr>
<td>10:20 am</td>
<td>Dietary Management in IBS: What’s the Current Practice and What is New?</td>
<td>Jenny Sauk, MD, MD</td>
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<tr>
<td>10:40 am</td>
<td>Assessment and Diagnosis of Avoidance Restrictive Food Intake Disorder (ARFID) in GI Disorders</td>
<td>Jenny Sauk, MD, MD</td>
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<tr>
<td>11:00 am</td>
<td>Diagnostic Assessment of Chronic Abdominal Pain</td>
<td>Jenny Sauk, MD, MD</td>
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<tr>
<td>11:20 am</td>
<td>Pharmacologic Treatment of Chronic Abdominal Pain</td>
<td>Jenny Sauk, MD, MD</td>
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<tr>
<td>12:20 pm</td>
<td>What’s New and Notable in IBD for 2020</td>
<td>David T. Rubin, MD, MD</td>
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<tr>
<td>2:40 pm</td>
<td>Management of Ulcerative Colitis - Case-Based Discussion</td>
<td>Jenny Sauk, MD, MD</td>
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<td>3:40 pm</td>
<td>Q &amp; A</td>
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<tr>
<td>3:50 pm</td>
<td>Break</td>
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### Mellinkoff Agenda

**Course Overview**

- **Esophageal Disorders**
  - Moderator: Jeffrey L. Conklin, MD

**Liver Disorders**

- Moderator: Beshoy T. Yanny, MD, UCLA

**Hepatitis**

- Hepatitis C: The Gift that Just Keeps on Giving: Sammy Saab, MD, MPH
- Hepatitis B: Practical Approach for the Clinician: Steven-Huy Han, MD

**Treatment**

- Treatment of Refractory Ascidis: Mohamed El Kabany, MD
- Autoimmune Hepatitis and Primary Biliary Cholangitis: Gina Choi, MD

**Challenging Patient Cases and Q & A**

**Endoscopy Video Forum - Tips and Techniques: How Would You Approach It?**

- Moderator: Adarsh M. Thaker, MD

**Panel**

- Danny Issa, MD, William E. Karnes, MD, Rajesh N. Keswani, MD, MS, Stephen Kim, MD, V. Raman Muthusamy, MD, MAS, Harold E. Paredes, MD, Bennett E. Roth, MD, Alireeze Sedarat, MD, Adarsh M. Thaker, MD

**Non-CME – Hands-On Session – Open to All Attendees**

This hour-long, hands-on session will provide a valuable learning opportunity, though no accredited hours will be issued for this portion of the program. It will feature stations demonstrating diverse endoscopic procedures, technologies and techniques using ex-vivo pig stomachs and/or other methods. The topics include the use of endoscopic mucosal resection, retrieval of difficult foreign bodies and food impactions, onologic endoscopy, treatment for Barrett’s esophagus, closure of perforations, dealing with fistulas, control of bleeding and more.

- Faculty: Danny Issa, MD, Kevin Ghassemi, MD, William E. Karnes, MD, Rajesh N. Keswani, MS, Stephen Kim, MD, V. Raman Muthusamy, MD, MAS, Harold E. Paredes, MD, Bennett E. Roth, MD, Alireeze Sedarat, MD, Adarsh M. Thaker, MD

**Adjourn**

**Break**

**Lunch**

**Functional Bowel Disease**

- Moderator: Lin Chang, MD

**Management of IBD**

- Safety of Therapies in IBD Medication Risk Counseling
- Therapeutic Drug Monitoring - My Approach

**Panel**

- Raymond K. Cross, Jr., MD, MS, Mona Rezapour, MD, MHS, David T. Rubin, MD

**Adjourn**
UCLA Gastroenterology and GI Surgery ranked #6 in the nation by *U.S. News & World Report* in its survey. UCLA Health hospitals in Westwood and Santa Monica also ranked #6 in the nation.