Primary Purpose
and Priorities

Benefiting ACG Physicians, GI Patients and Public Health
Mission Statement

The ACG Institute's primary mission is to advance the field of clinical gastroenterology through education and research. Consistent with that mission, the ACG Institute for Clinical Research & Education serves as a forum in which to build on the goals of the College. The Institute promotes research in clinical gastroenterology, educates physicians and the public, and provides resources to support the future needs of clinical gastroenterology, GI patients, as well as young clinical investigators who as they develop careers in academic gastroenterology, enrich knowledge and treatments in digestive diseases.
2010-2011 Annual Report

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“Among the ACG Institute’s greatest strengths is its significant commitment to excellent clinical research coupled with its flexible and innovative development of targeted new educational initiatives.”

Edgar Achkar, MD, MACG | ACG Institute Director
Institute Leadership
2010-2011 Board of Directors

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The ACG Institute’s primary purpose is to support clinical research and advance education in gastrointestinal disease.

Today, the financial state of the Institute is strong. We are on solid ground fiscally thanks to the success of the Capital Campaign. With these financial resources, the ACG Institute supports vibrant and relevant programs that deliver a measurable return on our investment, and are aligned with the priorities of the College and the interests of the GI specialty.

Among the ACG Institute’s greatest strengths is its significant commitment to excellent clinical research coupled with its flexible and innovative development of targeted new educational initiatives. The evolution of the ACG Institute, its mission and many accomplishments were featured in a November 2010 article in the Red Section of The American Journal of Gastroenterology, which is reprinted here with permission of the Co-Editors.

I urge you to explore this Annual Report outlining the many impressive achievements of the ACG Institute and learn how its work can benefit you, your practice, your patients and public health.

Edgar Achkar, MD, MACG
ACG Institute Director
“The ACG Institute’s priorities have evolved to reflect the realities of GI practice, the changing financial landscape in terms of support for clinical research and competing demands on GI specialists. Now more than ever, our ability to provide increasing levels of research support is a rare and important achievement.”

Delbert L. Chumley, MD, FACG | ACG President, 2010-2011
As a respected source of innovative and impactful programs that offer tangible benefits to GI practitioners, the ACG Institute for Clinical Research & Education plays a central role in the life of the College.

**Primary Purpose**
The ACG Institute’s primary purpose is to support clinical research and advance education in gastrointestinal disease.

**Principles**
The animating principles of the ACG Institute for Clinical Research & Education are a shared commitment to advancing digestive health and a willingness to invest precious resources of financial and human capital in programs aimed to ensure a strong future for the GI specialty.

**Priorities**
The ACG Institute exists to advance the mission and goals of the College, and has emerged in its own right as an active incubator of educational programs for physicians and patients. Its top priorities are to identify and fund excellent clinical research and to develop practical and pertinent educational initiatives.

**Programs**
Thanks to the contributions of numerous GI experts, the ACG Institute can deliver educational programs for physicians and patients that meet specific needs and deliver results such as recent efforts on Colorectal Cancer screening, Inflammatory Bowel Disease, chronic Hepatitis C infection, and Irritable Bowel Syndrome.
This educational video for GI patients, produced by the ACG Institute, underscores the lifesaving importance of CRC screening by colonoscopy. Featuring the experience of a female patient throughout the day of her exam, the video instills confidence in patients about the effectiveness, safety and importance of colonoscopy.

Gastroenterologists recognize that treating HCV is the right thing to do but may face clinical challenges managing HCV patients. The ACG and its Expert Task Force on Hepatitis C developed this resource kit with the objective of providing clinical tools and practice resources to maximize care of patients with HCV in the community setting.

ACG Institute Benefits

Practitioners & Patients

The ACG Institute delivers timely, relevant and useful products for ACG members and GI patients by:

- Offering the latest clinical information
- Developing new and relevant tools for GI practitioners
- Supporting patient education and digestive disease awareness with clear, accessible materials developed by leading experts
Capital Campaign Update

Thanks to good stewardship – and the generosity of ACG member physicians and industry supporters – the ACG Institute has the resources to develop good ideas and the leadership to transform them into great programs.

Since its inception, ACG’s clinical research support has been funded under the auspices of the Institute in large part due to the success of the Capital Campaign. Thanks to the visionary support of ACG members and charitable contributions from companies, the Institute has a dedicated source of funds to generate sufficient income to support clinical research and education priorities in perpetuity.

Generous Campaign Supporters from Industry

The ACG Institute has exceeded every expectation for Capital Campaign. The Institute has attracted major support from companies without whose demonstrated vision and generosity, this success would not have been possible. The ACG Institute has worked to ensure that our members and the broader GI community recognize their leadership and generosity.

The College recognizes with great thanks the contributions of:

- AstraZeneca, LLP
- Centocor Ortho Biotech, Inc. (now Janssen Biotech, Inc.)
- Takeda Pharmaceuticals North America, Inc.
- Abbott Laboratories
- Boston Scientific
- Procter & Gamble
- Roche Laboratories, Inc.
- Salix Pharmaceuticals, Inc.
- Olympus America, Inc.
- Prometheus Therapeutics & Diagnostics
- Shire
- ConMed Endoscopic Technologies
- Given Imaging
Capital Campaign Donor List

The College is grateful to the individual physicians whose generous ongoing support is essential to this ambitious undertaking and to those companies whose dedication to excellence in clinical gastroenterology is making such a difference in the Campaign’s remarkable success. This list includes gifts over $1,000 as of January 1, 2011.

### Corporate Gifts

**Institute Founder**
- AstraZeneca, LLP
- Centocor Ortho Biotech, Inc. (now Janssen Biotech, Inc.)
- Takeda Pharmaceuticals North America, Inc.

**Leadership Circle**
- Abbott Laboratories
- Boston Scientific
- Procter & Gamble
- Roche Laboratories, Inc.
- Salix Pharmaceuticals

**Platinum Benefactor**
- Olympus America, Inc.
- Prometheus Therapeutics & Diagnostics Shire

**Silver Benefactor**
- ConMed Endoscopic Technologies
- Given Imaging

**Named Gifts**
- Virginia Gastroenterological Society and Old Dominion Society of Gastroenterology Nurses and Associates: Emily Couric Annual Lecture
- Dr. & Mrs. J. Edward Berk: Berk/Fise Clinical Achievement Award
- Meretek Diagnostics, Inc. & Otsuka Pharmaceutical Co., Ltd.
- Amy L. Flax

### Major Gift $25,000 to $99,999

(continued)
- Dr. & Mrs. John W. Popp, Jr.
- Douglas K. Rex, MD, FACP
- Dr. & Mrs. Joel E. Richter
- Barbara & William Rosenthal
- Shodeen Family Foundation
- Texas State Society for Gastroenterology and Endoscopy
- Ronald J. Vender, MD, FACP

**Sponsor $10,000-$24,999**
- Dr. & Mrs. Peter A. Banks
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- Edward L. Cattau, Jr., MD, FACP
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- David Y. Graham, MD, MACG
- John F. Gray, MD, FACP
- Philip O. Katz, MD, FACP
- John F. Gray, MD, FACP
- William D. & Elizabeth Carey
- Kenneth R. DeVault, MD, FACP
- Marc Kudisch, MD
- Joseph W. Leung, MD, FACP
- Given Imaging
- Gary W. Johnson, MD, FACP
- Eric Lee, MD, FACP
- Long Island Gastroenterology Associates
- Richard McCallum, MD, FACP
- Mark McGehee, MD, FACP
- Dr. & Mrs. Lawrence J. Brandt
- William D. & Elizabeth Carey
- Dr. & Mrs. John W. Popp, Jr.
- Allen Reinecke, MD
- Douglas K. Rex, MD, FACP
- Dr. & Mrs. Joel E. Richter
- Barbara & William Rosenthal
- Shodeen Family Foundation
- Texas State Society for Gastroenterology and Endoscopy
- Ronald J. Vender, MD, FACP

### Benefactor $5,000 to $9,999

(continued)
- Robert B. Cameron, MD, FACP
- Kiron M. Das, MD, PhD, FACP
- Wm. Kern Deschner, MD
- Kenneth R. DeVault, MD, FACP
- Attila Ertan, MD, MACG
- Francis L. Farraye, MD, FACP
- Joseph F. Fitzgerald, MD, MACG
- Stephen Freeman, MD, FACP
- GI Clinic of San Antonio, PA
- Kent C. Holtzmuller, MD, FACP
- Thomas Kepczyk, MD
- Marc Kudisch, MD
- Eric Lee, MD, FACP
- Long Island Gastroenterology Associates
- Richard McCallum, MD, FACP
- Park McGehee, MD, FACP
- John M. McMahon, MD, MACG
- Kevin W. Olden, MD, FACP
- Daniel Present, MD, MACG
- A.P. Rachhuthaman, MD
- Samir A. Shah, MD, FACP
- Albert C. Svoboda, Jr., MD, MACG
- Jerome D. Wave, MD, MACG
- Rowen K. Zetterman, MD, MACG

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- Samir A. Shah, MD, FACP
- Albert C. Svoboda, Jr., MD, MACG
- Jerome D. Wave, MD, MACG
- Rowen K. Zetterman, MD, MACG

**Group Practice Gift of $100,000**
- Digestive Health Associates of Texas
- Sindhuv Abrahams, MD
- Prasad Vallurupalli, MD
- Narasimharo Vemula, MD, FACP
- Howard Weiner, MD
- Michael Weisberg, MD
- Jeffrey Weinstein, MD
Protecting Time for Innovative Clinical Research

Nobel Prize winner Dr. Barry Marshall is well known for his pioneering research on Helicobacter pylori. Less well known is the fact that Dr. Marshall received a research grant of $10,000 from the ACG in 1989 during his time at the University of Virginia for a project, “Clinical and Histologic Sequelae of Peptic Ulcer Surgery: A Role for Campylobacter pylori?” This grant pre-dates the use of H. pylori to designate this highly prevalent gut pathogen.

From the outset of its research program, the College had the foresight to invest in innovative clinical research.

When the ACG Institute was formed in 1994, it continued to invest wisely and well in clinical GI research. Support for 499 investigators, totaling just over $12 million, is clear evidence that the ACG Institute is serious about protecting time for clinical research and cultivating the capabilities of talented investigators whose work advances understanding and treatment of digestive disease.

Currently, the ACG Institute underwrites over a million dollars annually for clinical research funding directed to investigators from top institutions doing great research on patient-care oriented projects. Through this support, the ACG Institute strengthens the capabilities of gastrointestinal specialists, substantially advances patient care, and promotes digestive health.

Junior Faculty Award Grows to Three Years

An analysis of the careers and productivity of ACG’s Junior Faculty awardees since 1997 reveals a tremendous return on investment for this career development award in terms of the publications, presentations at the ACG Annual Meeting, notable success in securing NIH funding, and careers in academics. For many years, the award protected time for young investigators for two years for a total of $150,000.

It is with tremendous pride that the ACG Institute reports that the ACG Board of Trustees unanimously approved extending the term of the ACG Junior Faculty Award to three years, at $75,000 per year, for a total of $225,000 beginning with the 2012 grant cycle.
ACG Junior Faculty Development Grant

ACG 2011 Junior Faculty Development Grant

Considered the “jewel in the crown” of the College’s research program, the 2011 ACG Junior Faculty Development Grant is a two-year award designed to support a junior faculty member or mid-career clinical investigator of outstanding promise to establish an independent, productive career in gastroenterology or hepatology. This award of $75,000 per year for two years provides salary support for protected time to young investigators at critical points in their career development.

The ACG Board of Trustees in 2011 approved the five awards recommended by the ACG Research Committee from their review of an excellent field of applicants:

2011 Junior Faculty Development Grants

Eric Benchimol, MD
Children’s Hospital of Eastern Ontario
The Ontario Crohn’s and Colitis Cohort: Epidemiology and Diagnostic Lag of Inflammatory Bowel Disease in Ontario, Canada

Jason K. Hou, MD
Baylor College of Medicine
Adherence to Practice Guidelines in Veterans with Inflammatory Bowel Disease

Ponni Perumalswami, MD
Mount Sinai School of Medicine
Culturally Targeted Patient Navigation in Ethnic Urban Populations with Chronic Hepatitis B and Hepatitis C

Tyler Stevens, MD, FACG
Cleveland Clinic Foundation
Pathways of Oxidative Stress in Chronic Pancreatitis

Amit Syngal, MD
UT Southwestern Medical School
Predictors of Screening Failure for HCC in a Safety Net Hospital
2010 Junior Faculty Development Grants

Katherine Garman, MD  
Duke University  
*Insights into the Pathogenesis of Barrett’s Esophagus through MicroRNA*

David Koch, MD  
Medical University of South Carolina  
*Endothelin-1 as a Mediator of the Hepatopulmonary Syndrome in Humans*

Alberto Rubio-Tapia, MD  
Mayo Clinic  
*Clinical Staging and Survival in Refractory Celiac Disease: Validation and Refinement of a New Staging Model Using a Multinational Cohort*

Harminder Singh, MD  
University of Manitoba  
*Detection and Prevention of Colorectal Cancer*
ACG Clinical Research Award

ACG 2011 Clinical Research Award

Each year, the College offers Clinical Research Awards of up to $35,000 for original clinical research. The mission of the ACG Clinical Research Awards program is to fund innovative research that is patient-care oriented. The Committee also considers proposals for pilot awards of up to $10,000 within this category. Selected for funding for 2011:

2011 Clinical Research Awards

Jennifer C. Lai, MD
University of California, San Francisco
Chronic Inflammation Related to Hepatitis C and Risk of Bone Disease

Linda S. Lee, MD
Brigham and Women’s Hospital
MicroRNA Expression Profiles in Cystic Neoplasms of the Pancreas

Douglas B. Mogul, MD
Johns Hopkins University
Epigenetic Regulation of Hepatitis B Virus

Aldo J. Montano-Loza, MD
University of Alberta
Frequency and Clinical Impact of Sarcopenia in Patients with Cirrhosis Evaluated for Liver Transplantation

Laura Targownik, MD
University of Manitoba
The Value of Bone Mineral Density in Predicting Fracture in Patients with Inflammatory Bowel Disease: A Population-based Study

Marcelo F. Vela, MD, MSCR, FACG
Baylor College of Medicine & M.E. DeBakey VA Medical Center
Effect of Obesity and H. pylori Status on LES Function and Reflux Characteristics in Patients with GERD and Barrett’s Esophagus

Raj K. Vuppalanchi, MD
Indiana University
Electrical Stimulation Cramp Threshold Frequency: A Novel Tool to Assess Skeletal Muscle Cramps Severity in Patients with Cirrhosis
Yize R. Wang, MD
Mayo Clinic Jacksonville

Sachin B. Wani, MD
University of Colorado, Denver
The Clinical Impact of Immediate On-site Cytopathology Evaluation During Endoscopic Ultrasound-Guided Fine Needle Aspiration of Pancreatic Masses: A Multicenter, Prospective Randomized Controlled Trial

2011 Clinical Research Awards Pilot Projects

Amit Bhatt, MD
Cleveland Clinic Foundation
Evaluation of Zinc Alpha 2-Glycoprotein in Pancreatic Fluid as a Diagnostic Biomarker of Chronic Pancreatitis

Lea Ann Chen, MD
Johns Hopkins University School of Medicine
A Sensitive Stool Diagnostic Assay to Study Enterotoxigenic Bacteroides fragilis in Inflammatory Bowel Disease

Tiffany M. Day, MD
University of Florida
Functional Magnetic Resonance Imaging Assessment of Appetite After Initiation of Metformin: A Pilot Study

Manish Gala, MD
Massachusetts General Hospital
Candidate Germline Alterations in Sessile Serrated Polyposis

David J. Kearney, MD
Seattle Veterans Administration Medical Center
The Effect of Mindfulness Training on Eating Behaviors and Food Intake

Andrew W. Yen, MD
Sacramento VA Medical Center and the UC Davis School of Medicine
The Water Method Increases Adenoma Detection by Reducing Colonic Contractions During Withdrawal Phase of Colonoscopy
2010 Clinical Research Awards

**Braden Kuo, MD**
Massachusetts General Hospital
*Non-Invasive Characterization of Gastric Motility Using MRI*

**Joseph Leung, MD**
UC Davis Medical Center
*RCT Comparing Effects of Continuous (Repeated) ERCP Mechanical Simulator (EMS) Practice on Trainees’ Clinical ERCP Performance*

**James Lord, MD**
Benaroya Research Institute
*CD4+ Regulatory and Effector T Cell Differentiation in Interferon Therapy for Hepatitis C*

**Heiko Pohl, MD**
White River Junction VA Medical Center
*Does Cap Assisted Colonoscopy Improve Adenoma Detection? A Randomized Trial*

**Ron Schey, MD**
University of Iowa Hospitals and Clinics
*The Effects of Cannabinoid on Patients with Non-GERD Related Non-cardiac Chest Pain*

**Elizabeth Verna, MD**
Columbia University College of Physicians and Surgeons
*Serum Lipopolysaccharide Measurement to Predict Hepatic Fibrosis in Liver Transplant Recipients with Hepatitis C*

**Wahid Wassef, MD**
University of Massachusetts Medical School
*Pancreatitis Quality of Life Instrument (PANQOLI): A Psychometric Evaluation*
2010 Clinical Research Awards Pilot Projects

David Armstrong, MD  
McMaster University  
*A Pilot Study to Develop and Evaluate a Multifaceted Educational Tool for Use in a Prospective, Cluster-Randomized Trial of Practice Audit and Targeted Education for Colonoscopy Quality Improvement*

Kathleen Corey, MD  
Massachusetts General Hospital  
*The Association of Serum Vitamin D Levels and Progression of Hepatic Fibrosis*

Linda Cummings, MD  
University Hospitals Case Medical Center  
*Effect of Vitamin D Supplementation on 15-Prostaglandin Dehydrogenase Expression in Barrett’s Esophagus*

Karen Kim, MD  
Cleveland Clinic Foundation  
*Clinical Features and Outcomes in Patients with 15-PGDH-positive Colorectal Cancers*

Monthira Maneerattanaporn, MD  
University of Michigan  
*A Pilot Study to Determine the Key Characteristics Which Aid in the Diagnosis of Constipated Patients with Dyssynergic Defecation*

Tarun Narang, MD  
Carolinas Medical Center  
*Intravenous Interferon During the Anhepatic Phase of Liver Transplantation and Prevention of Recurrence of Genotype 1 Hepatitis C Virus*

Jenny Sauk, MD  
Mount Sinai Medical Center  
*Developing a Confocal Microendoscope (CME)-Based Classification System of Histologic Inflammation in Ulcerative Colitis*

Achuthan Sourianarayanane, MD  
Cleveland Clinic Foundation  
*Foundation Mechanism of the Effect of Midodrine on Portal Pressures in Patients with Cirrhosis*

Carlo Traverso, MD  
Massachusetts General Hospital  
*Fecal DNA-based Ova and Parasite Detection*

Miranda van Tilburg, MD  
University of North Carolina  
*Dietary Restraint and Motility in Adolescents who Suffer from Irritable Bowel Syndrome*

Yinghong Wang, MD  
Cleveland Clinic Foundation  
*Investigation of Serotonin Pathway in the Pathogenesis of Irritable Pouch Syndrome*
Realizing the Promise of Research Careers at Smaller GI Programs

The ACG Institute takes seriously the responsibility to support excellent clinical research, and this year we are proud to introduce a new Clinical Research Grant aimed specifically for investigators at smaller medical institutions. In recognition of the need to broaden the scope of its research support to ensure funding for first-rate work from a range of institutions, the ACG Institute in 2011 introduced a new “Smaller Programs” Clinical Research Award.

The goal is to encourage investigators from these smaller programs to participate in clinical research by supporting mentoring. A requirement of the new “Smaller Programs” Clinical Research Award is a clearly-defined mentoring plan, including e-mentoring, if necessary.

The ACG Institute also wants to ensure that great clinical science is recognized – regardless of the size or reputation of the institution that sponsors it. For the purposes of the new award, “smaller” GI programs are defined as GI programs with 15 or fewer full-time faculty across the program’s sites.

New in 2011
“Smaller Programs” Clinical Research Award

Given the ACG Institute’s aims to stimulate and support excellent clinical GI research, while at the same time maintaining an ongoing commitment to fund the best science, funds under the new category of “Smaller Programs” Clinical Research Award are intended to make the promise of a research career more broadly available by targeting investigators at smaller training programs. Selected for the inaugural award:

Mohammad F. Madhoun, MD
University of Oklahoma Health Sciences Center
Cancer Stem Cell Markers in Hepatocellular Carcinoma
Pointers & Pearls for Grant Writers

ACG’s new Grant Writing Tutorial offers practical advice and “insider” knowledge of the ACG grant review process to help applicants improve their submissions. Developed by ACG Research Committee veterans, the pointers range from the best ways to write a clear abstract to advice on presenting methodology. The best pearl: “When you have finished proofreading, proofread again!” This is available to all in the ACG Institute section of the ACG Web site.

Grant Writing Tutorial

1. Checklist for Success: Winning the Grant Writing Game
2. Useful Resources for the Novice and Expert Grant Writer
3. Pearls and Pitfalls for Grant Applications to the American College of Gastroenterology
   (What the Research Committee looks for – and ways to get funded)

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David Geffen School of Medicine at UCLA
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2010 & 2011 Members

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Cleveland Clinic Foundation

Fritz Francois, MD, FACP
NYU School of Medicine

Frank A. Hamilton, MD, MPH, MACG
National Institutes of Health/NIDDK

Dennis M. Jensen, MD, FACP
UCLA Medical Center

Charles J. Kahi, MD, FACP
Indiana University

Fasiha Kanwal, MD
Washington University

Jonathan M. Koff, MD
Sibley Memorial Hospital

Uri Ladabaum, MD
Stanford University

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Yale University School of Medicine

Girish Mishra, MD, MS, FACP
Wake Forest University School of Medicine

Santiago J. Munoz, MD, FACP
Temple University School of Medicine

Ece A. Mutlu, MD, FACP
Rush University Medical Center

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Johns Hopkins Hospital

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University of Manitoba

Amitabh Chak, MD, FACP
University Hospitals of Cleveland

Denesh K. Chitkara, MD
Merck & Co.

Jason T. Connor, PhD, FACP
Berry Consultants

Gregory S. Cooper, MD, FACP
University Hospitals of Cleveland

Willem J.S. de Villiers, MD, PhD
University of Kentucky

Deborah A. Fisher, MD, FACP
Duke University
Junior Faculty Awardees Dominate this Showcase Session

The careers and contributions of investigators selected for the ACG Junior Faculty Development Grant are a great source of pride to the leadership of the ACG Institute. An analysis of their careers by Shaheen et al. in 2009 revealed that the overwhelming majority of ACG grantees go on to secure funding by prestigious federal agencies, have numerous publications and continue in academic careers. What is notable about the ACG Junior Faculty awardees is that so many have made important contributions to enriching the scientific life of the College by giving oral presentations of their research at the ACG Annual Scientific Meeting.

In 2010, the President’s Plenary session at ACG, widely recognized as the showcase for the best abstracts in each organ system category, was dominated by former and current Junior Faculty Grant awardees. The College is grateful to the following individuals who submitted their research to ACG and helped to make the Annual Scientific Meeting in 2010 an important forum for the presentation of excellent clinical science in gastroenterology.

Bo Shen, MD, FACP
The Cleveland Clinic Foundation
Safety and Outcome of Endoscopic Therapy for Ileal Pouch Strictures

Bechien Wu, MD, MPH
Brigham & Women’s Hospital
Early Resuscitation with Lactated Ringer’s Reduces Systemic Inflammation in Acute Pancreatitis: A Multi-Center Randomized Controlled Trial

Harminder Singh, MD, MPH
University of Manitoba
Colorectal Cancer Mortality After Colonoscopy: A Population-Based Study

Claudia Zein, MD, MSc
Cleveland VA Medical Center
Pentoxifylline Improves Nonalcoholic Steatohepatitis: Results of a Double-Blinded, Randomized, Placebo-Controlled Trial

Alberto Rubio-Tapia, MD
Mayo Clinic, Rochester, MN
Exploring Celiac Disease Outcomes in the Community: Melting the Celiac Iceberg?
Growing from strength to strength since its formation in 1994, the ACG Institute for Clinical Research and Education has staked a rightful claim as innovative originator of many of the signature initiatives in ACG’s recent history. This article on the ACG Institute’s history and accomplishments appeared in the Red Section of *The American Journal of Gastroenterology* in November, 2010.
Clinical gastroenterology research support

Since 1994, the Institute has provided funding to 479 investigators for clinical gastroenterological research. With the announcement of the 2010 research awards, the College surpassed the $11 million mark for support of clinical research. In 2010, grant support totaled $1,081,995, exceeding the first year of the $1 million mark. A record of five Junior Faculty Development Grants were awarded.

The Research Committee is responsible for the review of grant applications, and the ACG Board of Trustees votes on its recommendations. The 18 Clinical Research Awards recommended for funding in 2010 total $339,995. In addition, the Institute will support three Junior Faculty Development Grants at an overall level of $750,000, the largest number of these career development awards since their inception in 1997. Figure 1 shows a progressive increase in funding over time.

A five-year program to promote research in colorectal cancer prevention has resulted in funding of three important projects to date through a request for applications (RFA) process. Kahi et al. recently published the results of the first of these projects (1). Support of more than $360,000 total has been awarded to date for this special research program.

Measuring the impact of ACG grant funding

The influence of the ACG Institute’s funding on clinical research and education has been very gratifying. A recent objective and thorough assessment of the overall investment of the Institute for the past 25 years was conducted by Crockett et al., analyzing the impact of Institute funding on publication and advancement in academia (2). The analysis revealed that the ACG research grants provide a significant engine of original research and publication. All subcategories within gastroenterology were substantially represented in the awards process, and a high proportion of awardees published the results of their funded research and entered and remained in academic medicine. A majority of awards translated into publication in journals with a substantial impact factor, and a high proportion of awardees remain in academic gastroenterology (Table 2).

Education programs

Over the years, the ACG Institute has introduced numerous educational programs, such as the GSRD Education and Awareness program, for physicians and for the public. A didactic series in 2008 and 2009, ACG Saturdays with GI Experts, brought, in person, several experts in a variety of fields to 18 groups of clinicians around the country; three of the sessions were associated with Webcasts.

Evidence-based reviews. The ACG Institute has convened expert working groups who conduct systematic reviews and develop graded treatment recommendations. In 2002, the Institute supported the development of an evidence-based position statement on the management of irritable bowel syndrome (IBS) (3). In 2005, an ACG Task Force on Chronic Constipation reviewed the treatment options for this common gastrointestinal disorder (4). In 2008, an ACG IBS Task Force performed another comprehensive meta-analysis of the evidence on therapies for IBS and updated the original statement (5).

New interactive patient-education tools were built in accordance with the evidence-based recommendations, and an educational program was introduced in May 2009 in conjunction with World Digestive Health Day, sponsored by the World Gastroenterology Organisation. These patient-education efforts expand on a national IBS disease awareness campaign in 2002 and 2003 featuring broadcast-media messages and extensive patient outreach.

ACG Colorectal Cancer Prevention Action Plan. Colorectal cancer has been a significant and long-standing focus for the education and public-awareness activities of the ACG Institute. The ACG Colorectal Cancer Prevention Action Plan is a two-fold initiative including a mechanism to fund larger research initiatives on colorectal cancer prevention through an RFA process as well as extensive screening awareness efforts and the development of educational tools for consumers.

Addressing the obesity epidemic. In 2008, the College committed resources to the development of a national obesity education initiative. A multidisciplinary task force under the direction of past president Amy E. Feix-Orenstein, DO, FACC, developed a campaign...
Table 2. Outcomes of research awardees (1993–2006)

<table>
<thead>
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<tr>
<td>Total awards</td>
<td>368</td>
</tr>
<tr>
<td>Publications resulting from the grant</td>
<td>256 (69%)</td>
</tr>
<tr>
<td>Current position of awardees</td>
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<tr>
<td>Total awardees</td>
<td>313</td>
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<tr>
<td>Academic</td>
<td>195 (62%)</td>
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<tr>
<td>Non-academic</td>
<td>112 (36%)</td>
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<tr>
<td>Unknown</td>
<td>6</td>
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<tr>
<td>Academic leadership position</td>
<td></td>
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<tr>
<td>Division chief</td>
<td>20 (63%)</td>
</tr>
<tr>
<td>Center director</td>
<td>31 (31%)</td>
</tr>
<tr>
<td>Fellowship director</td>
<td>21 (13%)</td>
</tr>
<tr>
<td>Other</td>
<td>14 (13%)</td>
</tr>
<tr>
<td>Unknown</td>
<td>34</td>
</tr>
</tbody>
</table>

Adapted from ref. 2.

ACG Institute Capital Campaign update. In 2001, the ACG Institute launched a Capital Campaign to assure long-term dependable funding for innovative clinical gastroenterology research, physician educational initiatives, and public information programs. With over $17 million in pledges as of 31 December 2009, the Capital Campaign exceeded every expectation and surpassed the first-phase goal of $12 million.

Pledges to the Capital Campaign came from officers, trustees, past presidents, and other college leaders, as well as ACG member physicians, group practices, and corporate donors. Virtually all of the major companies with a significant interest in the field of gastroenterology, endoscopy, and digestive health have made generous commitments to support the mission of the ACG Institute and to assure its future viability.

Conclusion
The ACG Institute for Clinical Research and Education fulfills a very important role in promoting the ACG’s commitment to clinical research and physician and patient education. The Institute’s record to date is a source of pride, particularly its support of young clinical investigators.

The Institute’s success is due in large part to the commitment and support of the Board of Trustees, the Board of Governors, and all the members who have participated and continue to be part of the Institute’s work.

CONFLICT OF INTEREST
Guarantor of the article: Edgar Achtian, MD
Specific author contributions: Anne Louise Oliphant provided the data, and both authors wrote the article together.

Financial support: None.
Potential competing interests: None.

REFERENCES

Based on an enhanced focus on nutrition, metabolism, and obesity both at the national health policy level and at the clinical practice level. The group developed educational tools for use by gastroenterologists in counseling overweight and obese patients.

Hepatitis C and the community gastroenterologist. With the rising prevalence of hepatitis C and the challenges of its treatment, the ACG Institute identified a pressing need for GI specialists to become better equipped to treat patients with chronic viral liver disease. A new education program highlights the new agents being developed for the treatment of hepatitis C. The main goal of the program is to help non-hepatologist GI specialists to treat hepatitis C patients and to integrate mid-level healthcare providers in the treatment program.

Gastrointestinal injury from NSAIDs and antiplatelet agents. The ACG collaborated with the American College of Cardiology and the American Heart Association in a joint effort to reduce the risk of gastrointestinal problems related to the use of nonsteroidal anti-inflammatory drugs (NSAIDs) and antiplatelet agents. A common document, “ACG/AHA/AHA 2008 expert consensus document on reducing the gastrointestinal risks of antiplatelet therapy and NSAID use,” was published simultaneously in The American Journal of Gastroenterology (6) and Circulation (7). The document offered guidelines outlining a stepwise approach for reducing the risk of ulcers and gastrointestinal bleeding among patients using NSAIDs along with antiplatelet agents.

ACG Institute Leadership Initiative. The goal of the ACG Institute Leadership Initiative, started in 2008, is to develop opportunities for current and future leaders within the College to obtain important leadership training and skills development. One of the cornerstones of this large initiative is the Leadership Training Award, which supports participation by several established and emerging leaders of the College in a multiyear executive-leadership training course through one of the major executive education programs at top US business schools.
**Perspectives: Evidence-Based Monograph Addresses IBD**

Recently, the development and publication of evidence-based reviews in major disease areas has topped the Institute’s agenda to meet a growing demand for rigorous evaluation of various therapies for common GI disorders.

**New IBD Meta-Analysis Supplements IBD-Themed Issue of The American Journal of Gastroenterology**

The ACG Institute convened an IBD Task Force which conducted a systematic review of trials evaluating medical therapies of active and quiescent Crohn’s disease and ulcerative colitis. Using the most up-to-date criteria of evidence-based medicine, ACG experts evaluated the newest studies on medical and biologic therapies for IBD, running the gamut from steroids and antibiotics to biologics and immunomodulators. Therapeutic approaches to inducing and maintaining remission as well as preventing relapse are included in a comprehensive new monograph, “An Evidence-Based Systematic Review on Medical Therapies for Inflammatory Bowel Disease,” published as a stand-alone supplement to *The American Journal of Gastroenterology* in April 2011.

The supplement’s publication coincided with a special IBD-themed issue of *AJG*, enhancing the clinical impact of this important new review of the evidence. The Journal’s Co-Editors, Dr. William D. Chey and Dr. Paul A. Moayyedi, invited original manuscripts addressing important translational and clinical management issues in IBD for the issue, and also featured the scientific papers which emerged from the meta-analysis.

**ACG Task Force on IBD**

Nicholas J. Talley, MD, PhD, FACG, University of Newcastle, *Chair*
Maria T. Abreu, MD, University of Miami
Jean-Paul Achkar, MD, FACG, Cleveland Clinic Foundation
Charles N. Bernstein, MD, FACG, University of Manitoba
Marla C. Dubinsky, MD, FACG, UCLA Cedars-Sinai Medical Center
Stephen B. Hanauer, MD, FACG, University of Chicago
Sunanda V. Kane, MD, MSPH, FACG, Mayo Clinic, Rochester, MN
William J. Sandborn, MD, FACG, University of California, San Diego
Thomas A. Ullman, MD, FACG, Mt. Sinai School of Medicine, New York, NY
Paul Moayyedi, BSc, MB ChB, PhD, MPH, FRCP, FRCPC, FACG, McMaster University Medical Centre
Public Health


The World Gastroenterology Organisation (WGO) named 2010 “The Year of IBD” which was the focus of its 2010 World Digestive Health Day on May 29, 2010. The WGO also endorsed World IBD Day on May 19, which is led by a number of patient groups worldwide, including the Crohn’s and Colitis Foundation of America. The ACG was proud to support the efforts of the WGO and the international community of patient groups in increasing IBD awareness.

Under the auspices of the Institute, new patient resources were developed to expand ACG’s educational offerings:

Expert Tips on Living Well with IBD

The “ACG Expert Tips on Living Well with IBD” features contributions from members of ACG’s IBD Task Force: Jean-Paul Achkar, MD, FACG, Marla C. Dubinsky, MD, FACG, Stephen B. Hanauer, MD, FACG, Sunanda V. Kane, MD, MSPH, FACG, William J. Sandborn, MD, FACG, and Thomas A. Ullman, MD, FACG.

Podcasts – Audio Q&A on Inflammatory Bowel Disease

ACG’s new podcast series, “Audio Q&A on Inflammatory Bowel Disease,” featured Dr. Dubinsky on children, teens and IBD; Dr. Kane on fertility, reproduction and pregnancy, as well as diet and nutrition; and Dr. Sandborn on new and emerging therapies and the importance of clinical trials.

ACG’s IBD patient awareness efforts were built on the publication of two ACG guidelines: Management of Crohn’s Disease in Adults by Gary R. Lichtenstein, MD, FACG, Stephen B. Hanauer, MD, FACG and William J. Sandborn, MD, FACG published in 2009, and Ulcerative Colitis Practice Guidelines in Adults by Asher Kornbluth, MD and David B. Sachar, MD, MACG published in 2010.
New Hepatitis C Resource Kit

Treating HCV in the Community GI Setting – How to Make it Work

The College and the ACG Institute are proud to introduce a new Hepatitis C Resource Kit for ACG members and allied health colleagues. The objective is to provide clinical tools and practice resources to maximize care of patients with HCV in the community setting. The kit addresses clinical and practice management challenges in treating HCV patients. All of the materials are designed to help your practice streamline patient monitoring with the goal of saving time and maximizing physician interaction during patient encounters. The kit features customizable templates, trackers and patient education aids, as well as a clinical update by HCV experts aimed to meet the needs of gastroenterologists. A flow sheet to monitor treatment as well as lab orders can be downloaded and modified to meet your needs.

Order a Free Copy of the New HCV Kit

ACG members can order one free physician resource kit by email to info@acg.gi.org. All materials are also available via the ACG Web site at www.acg.gi.org and information on ordering patient materials is on page 32.

The ACG Hepatitis C Task Force was convened under the auspices of the ACG Institute and its members include both nationally recognized hepatologists and ACG members in clinical practice to bring their perspective and ensure the materials are useful and effective tools.

The leadership of the Institute and the ACG Officers and Trustees recognize with thanks:

Mitchell L. Shiffman, MD, FACG, Virginia Liver Institute, Newport News, VA, Chair
David E. Bernstein, MD, FACG, North Shore University Hospital and Long Island Jewish Hospital, Long Island, NY
Ira L. Flax, MD, MACG, Digestive and Liver Specialists of Houston, TX
Jorge L. Herrera, MD, FACG, University of South Alabama, Mobile, AL
Paul Y. Kwo, MD, FACG, Indiana University Medical Center, Indianapolis, IN
Harry E. Sarles, Jr., MD, FACG, Digestive Health Associates of Texas, Dallas, TX
Zobair M. Younossi, MD, MPH, FACG, Inova Health System, Falls Church, VA

The ACG Hepatitis C Treatment Resource Kit covers clinical management issues such as:

- Pre-Treatment Assessment
- Initial Work-up
- Patient Counseling and Education
- Documenting Response to Treatment
- Monitoring Parameters for HCV RNA During Treatment
- Laboratory Studies During Therapy
- Use of Growth Factors
- Managing Depression
- Managing Cytopenias
HCV: Major Public Health Challenge

In the United States, hepatitis C virus (HCV) is the most common chronic blood-borne infection, the most common cause of chronic liver disease contributing to progressive liver fibrosis, cirrhosis and liver cancer, and is the most frequent cause for liver transplantation. Dr. Shiffman notes that primary care physicians are identifying patients with chronic viral hepatitis C at an increasing rate and he predicts that as new and more effective treatments for chronic HCV become available, more patients will seek treatment.

Hepatologists currently treat the majority of patients with chronic HCV, but are typically located at large medical centers and in most cases, will be unable to expand their clinical practices to care for the increase in patients with HCV seeking medical care. As a result, many experts and medical societies like the ACG believe that community-based gastroenterologists will begin to manage and treat an increasing number of patients with chronic HCV in the future. The ACG Hepatitis C Treatment Resource Kit was developed to assist community-based gastroenterologists achieve this goal.

Reason for Hope

The current standard of care, peginterferon plus ribavirin, results in a sustained viral response in fewer than 45 percent of patients. However, the introduction of new, direct acting anti-viral agents (DAA) against HCV when combined with peginterferon and ribavirin will increase sustained virologic response and “cure” HCV in 70-75 percent of patients. These new treatments will significantly change the landscape of HCV therapy and lead to a marked reduction in mortality from chronic HCV within 5 years after these medications are introduced.

The new ACG Hepatitis C Resource Kit provides gastroenterologists with sound strategies to make their practices more “user friendly” for HCV patients. The kit addresses practice management needs, and offers flow sheets, trackers and templates to help manage HCV patients. All of the materials are designed to help your practice streamline patient monitoring with the goal of saving time and maximizing physician interaction during patient encounters.

The group collaborated on a variety of templates and sample patient education forms included in the HCV Resource Kit which can be ordered by email (one free copy to ACG members by emailing info@acg.gi.org) or downloaded from the ACG Web site (www.acg.gi.org) and customized for your practice. To maximize the usefulness of these materials, and create the greatest flexibility for you and your staff, the patient education tools are also provided in a format that can be edited and personalized to meet the specific requirements of your practice and your patients.
**New Brochures for HCV Patients Available**

The new HCV patient education pamphlets featured in the kit are also available for download and to order in print via the ACG Web site at ACG’s Online Store.

Twenty (20) copies of each of the three patient brochures are available free of charge to ACG members. Please allow 3 to 4 weeks for delivery. Additional copies may be purchased for $25.00 per 100 copies, including shipping costs. ACG members can order online via the ACG Store (https://www.acg.gi.org/physicians/store.asp). Use the info@acg.gi.org email address to order one free copy of the HCV Resource Kit and for questions about brochure orders.
Addressing GI Issues in the Elderly

The demographics of the United States are changing, and we are a nation with an aging population. To meet the digestive health needs of elderly patients, ACG Past Presidents Seymour Katz, MD, MACG and Christina M. Surawicz, MD, MACG, have envisioned a series of publications on GI issues in the elderly. Addressing both clinical challenges specific to older patients, as well as their unique health information needs, these articles will be in the form of brief Q&A for physicians accompanied by a Frequently Asked Questions document for patients. The goal of the series is to assist the practitioner in dealing with the multi-faceted problems of gastrointestinal disease in the elderly.

By 2030, 28 percent of the U.S. population is expected to exceed 65 years of age. Soon, 77 million “baby boomers” will enter the “elderly” category, defined as patients over the age of 60. This extraordinary growth of elderly patients creates challenging management and logistical problems for the clinician. Comorbid conditions and concomitant medications, as well as the aging process, may add to the difficulties in diagnosis and mask the classic signs and symptoms of gastrointestinal disease.

Certain pathological conditions afflict older patients, such as vascular disease, neoplasia, atrophic gastritis and impaired gut-related immunity, all of which may coexist with impaired cognition, depression and/or fears of social isolation which create formidable challenges to the clinician. The topics in this series include:

**Colorectal Cancer Screening in the Elderly**
Fernando S. Velayos, MD
University of California, San Francisco

**Management of Inflammatory Bowel Disease in the Elderly**
Seymour Katz, MD, MACG
Nassau Gastroenterology Associates, PC, Great Neck, NY

**Drug-Related Liver Injury in the Elderly**
James H. Lewis, MD, FACP
Georgetown University Medical Center

**Constipation**
Amy E. Foxx-Orenstein, DO, FACP
Mayo Clinic Scottsdale

**Fecal Incontinence**
Suzanne Rose, MD, FACP & Sita Chokhavatia, MD, FACP
Mt. Sinai School of Medicine

**Dysphagia**
Michael F. Vaezi, MD, PhD, FACP
Vanderbilt University Medical Center
Patients

Endoscopy in the Elderly (Conscious Sedation)
John R. Saltzman, MD, FACG
Brigham and Women’s Hospital

Managing GI Cancers in the Elderly
Stuart M. Lichtman, MD, FACP
Memorial Sloan-Kettering Cancer Center

Diarrhea in the Elderly
Lawrence R. Schiller, MD, FACP
Program Director, GI Fellowship, Baylor University Medical Center
Clinical Professor, UT Southwestern Dallas

Acute and Chronic Management of Viral Hepatitis in the Elderly
Paul Martin, MD, FACG
University of Miami School of Medicine

Liver Transplant
Robert L. Carithers, Jr., MD, FACG
University of Washington Medical Center

Polypharmacy Issues in the Elderly
Karen E. Hall, MD, PhD
University of Michigan/Ann Arbor VA Healthcare System

GERD and PPIs in the Elderly
Nicholas J. Shaheen, MD, MPH, FACG
University of North Carolina at Chapel Hill
ACG Institute Leadership Initiative  
*Cultivating Excellence in Physician Leadership*

In 2009, the Institute introduced a new Leadership Initiative. The goal of this innovative program is to develop opportunities for current and future leaders within the College and clinical gastroenterology in general to obtain important leadership training and skills development. The primary objective is for ACG’s physician leaders to become stronger participants in the world of clinical gastroenterology – and stronger contributors to the life of the College.

One of the cornerstones of this larger initiative is the **ACG/Salix Leadership Training Award**. The ACG Institute has identified established and emerging leaders within the College to participate in multi-day executive leadership training through one of the major executive education programs at top U.S. business schools, including Northwestern University, University of Pennsylvania, Harvard University and others.

The idea for the leadership program emerged during the presidency of Amy E. Foxx-Orenstein, DO, FACG. Dr. Foxx-Orenstein, Dr. Edgar Achkar, the ACG Institute Director, and ACG Past President Dr. Eamonn Quigley all helped to secure the sponsorship and generous support of Salix.

The College appreciates the support of Salix and its corporate leadership, and shares their belief that an investment in individual physician leaders is an investment in the specialty of gastroenterology with a potential to enhance not only the role our leaders play in the College but ultimately the many roles they play in their organizations, their communities, and our world.

**About the ACG/Salix Leadership Training Award**

With the belief that strengthening leadership skills among the physician volunteers whose contributions of time and talent are the fuel that runs the work of the College, ACG identified several programs from among the broad spectrum of offerings at the nation’s business schools which are appropriate to cultivating and enhancing the leadership skills of ACG participants and will best serve the professional and personal goals of the awardees, while at the same time enhancing their contributions to the College.
# Potential

*Cultivating Excellence in Physician Leadership*

## ACG/Salix Leadership Awards 2010-2011

### ACG Officers & Trustees

<table>
<thead>
<tr>
<th>Name</th>
<th>Title and Affiliation</th>
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<tr>
<td>Neena S. Abraham, MD, MSCE, FACG, ACG Trustee</td>
<td>Baylor College of Medicine, Michael E. DeBakey VA Medical Center</td>
</tr>
<tr>
<td>David A. Greenwald, MD, FACG, Chair, Board of Governors</td>
<td>Montefiore Medical Center</td>
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<tr>
<td>Stephen B. Hanauer, MD, FACG, ACG Secretary</td>
<td>University of Chicago</td>
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<tr>
<td>Daniel J. Pambianco, MD, FACG, Vice Chair, ACG Board of Governors</td>
<td>Charlottesville Gastro Associates</td>
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<tr>
<td>Irving M. Pike, MD, FACG, ACG Trustee</td>
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<tr>
<td>Mark B. Pochapin, MD, FACG, ACG Trustee</td>
<td>New York Hospital</td>
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<tr>
<td>Harry E. Sarles, Jr., MD, FACG, ACG Treasurer</td>
<td>Digestive Health Associates of Texas</td>
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<tr>
<td>Lawrence R. Schiller, MD, FACG, ACG President-Elect</td>
<td>Digestive Health Associates of Texas</td>
</tr>
<tr>
<td>Nicholas J. Shaheen, MD, MPH, FACG, ACG Trustee, and Chair, ACG Practice Parameters Committee</td>
<td>University of North Carolina at Chapel Hill</td>
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### ACG Committee Chairs 2010-2011

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<tr>
<td>Fritz Francois, MD, FACG, Chair, ACG Minority Affairs and Cultural Diversity Committee</td>
<td>NYU Medical School</td>
</tr>
<tr>
<td>Costas H. Kefalas, MD, FACG, Chair, ACG FDA Related Matters Committee</td>
<td>Akron Digestive Disease Consultants, Inc.</td>
</tr>
<tr>
<td>March E. Seabrook, MD, FACG, Chair, ACG National Affairs Committee Consultants in Gastroenterology, Columbia, SC</td>
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<tr>
<td>Renee L. Young, MD, FACG, Chair, ACG Training Committee</td>
<td>University of Nebraska</td>
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</table>
J.P. Achkar, MD, FACG, Past Chair, ACG Educational Affairs Committee, Staff Physician, Division of Digestive Diseases, The Cleveland Clinic Foundation, attended Weatherhead School of Management, Case Western Reserve University – Fall 2010, Spring 2011

Carol A. Burke, MD, FACG, ACG Trustee, Past Chair, ACG Educational Affairs Committee, Director, Center for Colon Polyps & Cancer, The Cleveland Clinic Foundation, attended Weatherhead School of Management, Case Western Reserve University – Fall 2010, Spring 2011

Cmdr. Brooks D. Cash, MD, FACG, Past Chair, ACG Public Relations Committee, ACG Governor for Military, Director, Colon Health Initiative, National Naval Medical Center, Bethesda, MD, attended Darden School of Business, University of Virginia – Spring 2010

Lin Chang, MD, Center for Neurobiology of Stress, UCLA Division of Digestive Diseases, attended Harvard Business School – Spring 2011

William D. Chey, MD, FACG, Co-Editor, The American Journal of Gastroenterology, Professor of Medicine, Director, GI Physiology Lab, University of Michigan, attended Harvard Business School – Summer 2010

Delbert L. Chumley, MD, FACG, ACG President, Gastroenterology Consultants of San Antonio, attended Wharton School, University of Pennsylvania – Fall 2009

Sunanda V. Kane, MD, FACG, ACG Trustee, Past Chair, ACG Women in Gastroenterology Committee, Associate Professor of Medicine, Mayo Clinic, Rochester, MN, attended Kellogg School of Management, Northwestern – Fall 2009

Philip O. Katz, MD, FACG, ACG Past President, Chair, Department of Gastroenterology, Albert Einstein Medical Center, participated in Leadership Communications Training – Spring 2011

Samir A. Shah, MD, FACG, Past Chair, ACG Board of Governors, Clinical Associate Professor of Medicine, Warren Alpert School of Medicine, Brown University, attended Harvard Business School – Fall 2009

Brennan M.R. Spiegel, MD, MSHS, FACG, ACG Institute Board, Assistant Professor of Medicine VA Greater Los Angeles Healthcare System, David Geffen School of Medicine at UCLA, attended UCLA Anderson School of Management – Fall 2010

Anne C. Travis, MD, FACG, Chair, ACG Women in Gastroenterology Committee, Associate Director GI Fellowship Program, Brigham and Women’s Hospital, attended Stanford Executive Program for Women Leaders – May 2010

Ronald J. Vender, MD, FACG, ACG Vice President, Chief Medical Officer, Yale Medical Group, Yale University School of Medicine, attended Wharton School, University of Pennsylvania – Spring 2010
Overview of the ACG Institute for Clinical Research & Education

Founded in 1994, the ACG Institute for Clinical Research & Education has emerged as a major source of funding for patient care oriented gastroenterology research, and an active and effective sponsor of educational programming for consumers and physicians alike.

**Advancing Knowledge About Digestive Disease Through Clinical Research**

Over the years, the ACG Institute has provided funding to 499 investigators for research directly relating to the clinical gastrointestinal practice. With the announcement of the 2011 research awards, the College surpassed the $12 million mark for support of clinical research.

Through its support for original clinical GI research, the Institute has achieved great visibility in the gastrointestinal community and has made an impact on the careers of many talented GI investigators. Through the Clinical Research Award, the ACG Institute invests in promising clinical investigators tackling some of the most important challenges in the field of gastroenterology. An indirect, but perhaps more long lasting, effect is that supporting clinical research feeds the pipeline to our specialty by attracting bright young individuals who are determined to be not only good physicians but also discriminating clinical researchers.

A top priority for the ACG Institute is to fund career development awards. The ACG Junior Faculty Development Grant is considered the jewel in the crown of the ACG Institute’s research program because of the outstanding track record of funded investigators and particularly their contributions in terms of publications, presentations at the ACG Annual Meeting, and the remarkable success in securing prestigious NIH funding.

**Promoting Awareness of Digestive Health Through Public Education**

Along with clinical research and physician education, public education is the third corner of the Institute’s pyramid of strength. Using its own funds, without support from other partners, the Institute has made a major financial commitment to supporting patient education on colorectal cancer screening and prevention. Partnerships with companies and organizations which share ACG’s mission to promote public awareness of digestive health have supported recent initiatives on the dangers of inflammatory bowel disease, hepatitis C, obesity, and irritable bowel syndrome, among other timely and relevant topics.

**About the American College of Gastroenterology**

The American College of Gastroenterology (ACG) was founded in 1932 to advance the scientific study and medical practice of diseases of the gastrointestinal tract. The College promotes the highest standards in medical education and is guided by its commitment to meeting the individual and collective needs of clinical GI practitioners.

Under the auspices of the ACG Institute, many of the most distinguished clinicians, researchers and academics in the field of gastroenterology have contributed to the educational mission of the College by writing and editing an impressive array of physician and patient education tools.

The hallmark of the ACG Institute since its inception has been to share first-class educational materials with GI subspecialists, as well as primary care physicians, internal medicine specialists and family practitioners.

ACG Institute for Clinical Research & Education
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