Innovative Technologies and Endoscopic Techniques to Treat Gastrointestinal Disorders; New Insight on Esophageal and Colorectal Cancers; Trends in *C. difficile*, GI Bleeding Mortality
Among Featured Topics Presented at the American College of Gastroenterology's 77th Annual Meeting

Las Vegas, NV (October 22, 2012) – Many of the world’s preeminent gastroenterologists have convened this week for the American College of Gastroenterology's (ACG) 77th Annual Scientific Meeting at The Venetian Resort, Las Vegas, NV to review the latest scientific advances in gastrointestinal research, treatment of digestive diseases and clinical practice management.

New technologies for treating conditions like gastroesophageal reflux (GERD), Irritable Bowel Syndrome (IBS) and gastroparesis; groundbreaking insights in inflammatory bowel disease (IBD) that explore racial disparities as well as the overlap of Irritable Bowel Syndrome (IBS) symptoms; reviews of a national health database to document epidemiological shifts in *C. difficile*-associated infectious diarrhea and a downward trend in inpatient mortality due to upper gastrointestinal bleeding; a wealth of new research that helps advance understanding of esophageal and colorectal cancer risks; as well case reports that aim to raise public awareness about the possible health risks of non-compliance with vitamin and mineral supplementation after gastric bypass surgery; and a little-known but costly gastrointestinal health effect of marijuana use are among the highlights of this year’s clinical scientific presentations.

A press kit with highlights of important new science presented at the meeting is available online at the ACG Web site [http://gi.org/media/press-releases-for-acg-annual-scientific-meeting/](http://gi.org/media/press-releases-for-acg-annual-scientific-meeting/)

*****PLEASE NOTE EMBARGO POLICY*****

News from the meeting is embargoed until Monday, October 22, 2012 at 8:00 am Eastern Daylight Time

Highlights from this year’s ACG Scientific Meeting include:

Access all abstracts featured in this press release

**Statins May Protect Against Esophageal Cancer**

Statin use is associated with protection from esophagus cancer according to a new meta-analysis of existing clinical studies exploring the cancer prevention effects of statins, suggested researchers from the Mayo Clinic. Dr. Siddharth Singh colleagues conducted a systematic review of eleven studies reporting 8,613 cases of esophageal cancer from studies including almost 1 million patients. “The meta-analysis of these studies showed a significant 30 percent reduction in esophageal cancer incidence with statins use,” said Dr. Singh. [Abstract](http://gi.org/media/press-releases-for-acg-annual-scientific-meeting/)

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Bone-Building Drugs for Osteoporosis Do Not Add to Risk of Esophageal Cancer
In a separate study, researchers at the Mayo Clinic Jacksonville found no association between oral use of bisphosphonates, a class of bone-building drugs widely used for prevention and treatment of osteoporosis, and the risk of esophageal cancer. This meta-analysis of 42 studies included 3,570 esophageal cancer patients in the analysis by Dr. Saowanee Ngamruengphong and colleagues. Abstract

Death from GI Bleeding Decreased in United States in Past Two Decades
The number of patients dying from upper gastrointestinal bleeding has decreased over the past two decades (1989 - 2009) from 4.69 percent to 2.13 percent – a result that researchers from Harvard Medical School and Brigham and Women’s Hospital attribute to the advances in medical and endoscopic therapies introduced over the past 20 years. In addition, the proportion of patients who underwent in-hospital endoscopic therapy has increased from 2 percent to 27 percent, while the length of hospital stay progressively decreased from 4.5 days to 2.8 days over this time period. Abstract

Experimental Treatment in Pediatric Patient Resolves Life-Threatening GI Bleeding Crisis
Dr. Timothy Laurie of Advocate Lutheran General Hospital, Arlington Heights, IL reported a case of the first use of Hemospray™ (Cook Endoscopy) in the United States outside of a clinical trial. Dr. Laurie and his colleague Peter Sargon, M.D., were granted permission to use an experimental hemostasis powder on a young patient with life-threatening internal bleeding. Abstract

Electrical Stimulation of the Esophagus Promising Treatment for Unresolved Reflux Symptoms
Three studies unveiled today examine small numbers of patients who had a device implanted that uses low energy electrical pulses to strengthen a weak or dysfunctional lower esophageal sphincter (LES) which is the underlying cause of GERD or acid reflux. Two of the studies by investigators Michael D. Crowell, Ph.D., FACP of Mayo Clinic Scottsdale and Edy Soffer, M.D., FACP of the University of Southern California looked at various endpoints including esophageal acid exposure, improvement in GERD symptoms, and reduction of use of acid-suppressing medications known as proton pump inhibitors. The authors conclude, “Electrical stimulation of the lower esophageal sphincter is effective for treating patients with GERD over long-term year duration.” Abstract 1 Abstract 2

In a separate and unrelated study, Arjan Bredenoord, M.D. and colleagues at the University Medical Center Utrecht in Rotterdam, The Netherlands, presented a study at ACG of eleven patients with refractory GERD symptoms with devices implanted in the LES. They found that ten of the eleven patients (91 percent) were able to discontinue PPI medications. Overall, their research revealed a statistically significant improvement in patients’ GERD symptoms, as well as a trend in improvement in their esophageal pH. Abstract

Chronic Constipation Linked to Increased Risk of Colorectal Cancer
Patients with chronic constipation may be at increased risk of developing colorectal cancer and benign neoplasms, according to co-investigator Nicholas J. Talley, M.D., Ph.D., of the University of Newcastle, New South Wales, Australia. “This study demonstrates an association, not causation, between chronic constipation and both colorectal cancer and benign neoplasms.” Abstract

Younger Endometrial Cancer Patients Face Increased Risk of Colorectal Cancer
Women diagnosed with endometrial cancer under age 50 had a “marked increased risk” of being diagnosed with colorectal cancer in a historical cohort study by researchers at the University of Manitoba, according to co-investigator Dr. Harminder Singh. He said, therefore these patients need close follow-up particularly for colorectal cancers occurring in the upper part (right-side) of the colon—more—
and recommended that CRC screening start at a younger age in such women.  

**Increased Colorectal Cancer Risk for Extended Family Members**

In the first population-based assessment of the risk of colorectal cancer in extended family members of patients with colorectal cancer (CRC), researchers from the Huntsman Cancer Institute in Salt Lake City, UT reported that first, second and third degree relatives of individuals with colorectal cancer had an increased risk of developing CRC themselves—with the strength of the association based on the degree of kinship, according to lead investigator, Niloy Jewel Samadder, M.D.  

**Marijuana Use May Cause Severe Cyclic Nausea, Vomiting, A Little-Known, But Costly Effect**

Marijuana use—both natural and synthetic—may cause cannabinoid hyperemesis—a little-known but costly effect that researchers suggest is a serious burden to the health care system as it often leads to expensive diagnostic tests and ineffective treatments in an effort to find the cause of a patient’s symptoms and to provide relief, according to two separate case reports by researchers from Scripps Green Hospital and Clinic in San Diego and Walter Reed Walter Reed National Military Medical Center/Uniformed Services University of the Health Sciences in Bethesda, MD.  

**A New Scarless Option to Treat Rare Swallowing Disorder, Achalasia**

Dr. Stavros N. Stavropoulos, Chief of Endoscopy at Winthrop University Hospital in Mineola, NY, presented findings of a study of 31 achalasia patients who underwent a procedure known as POEM (Per Oral Endoscopic Myotomy.) Their success rate was 29 of 31 patients, or 94 percent, who reported significant symptom resolution as measured by the Eckardt scale, a disease specific severity score for achalasia, as well as reduction in lower esophageal sphincter pressure.  

**Gut Permeability in Irritable Bowel Explored with Confocal Laser Endomicroscopy**

Dr. Julia Liu and colleagues at the University of Alberta in Canada measured epithelial gaps, or the spaces in the lining of the gut, with probe-based confocal laser endomicroscopy, an advanced endoscopic tool to obtain very high-resolution images of the mucosal layer of the GI tract. “The test is positive in about two thirds (64 percent) of patients with Irritable Bowel Syndrome (IBS), and negative in vast majority of the healthy controls (90 percent). “These findings suggest that a patient with a positive test has a 73 percent chance of having IBS,” said Dr. Liu.  

**Chronic Electrical Stimulation at Acupressure Points May Relieve Stomach Woes for Diabetics**

Diabetic patients who suffer from debilitating gastroparesis may find that chronic electrical stimulation at specific acupuncture points could relieve symptoms such as nausea, vomiting, early satiety, abdominal fullness, upper abdominal pain and bloating, according to lead investigator Jiande Chen, Ph.D. of the University of Texas Medical Branch.  

**Impact of Gender, Race and Obesity on Colorectal Cancer, Adenoma Detection Rates**

Body mass index seems to have a linear association with advanced adenoma detection rates in an African American and Hispanic male cohort, where a trend towards higher right–sided advanced adenomas is also seen in this study group, according to researchers from The Brooklyn Hospital Center.  

Researchers from The University of Texas Medical Branch collected colonoscopy data retrospectively from a university-based hospital and included all average risk screening colonoscopies performed between 2006 and 2011 that found men in the study group had a significantly higher prevalence of adenomas and advanced adenomas compared to women.
Type 2 Diabetes May Increase the Risk of Barrett’s Esophagus
Patients with Type 2 diabetes may face an increased risk for Barrett’s esophagus, regardless of other risk factors including smoking, alcohol consumption, obesity and reflux, according to researchers from the Mayo Clinic College of Medicine. This risk may be almost doubled, said co-investigator, Prasad G. Iyer, M.D., M.S., who added that it may also be higher in men with diabetes likely because men tend to carry more fat in the abdomen compared to women who tend to carry weight around the hips and thighs.

Abstract

Studies Suggest Possible Overlap of IBS Symptoms and Inflammatory Bowel Disease
In one study, researchers from California Pacific Medical Center in San Francisco found that mesalamine granules, an anti-inflammatory drug used to treat ulcerative colitis, improved abdominal pain and stool consistency in diarrhea predominant Irritable Bowel Syndrome (IBS). In a second study, researchers from Washington University in St. Louis found that tricyclic antidepressants—which are commonly used to treat IBS patients—may be effective in managing moderately-severe functional symptoms such as abdominal pain and diarrhea in patients with Inflammatory Bowel Disease (IBD).

Abstract 1

Abstract 2

Studies Explore Racial Disparities in IBD Symptoms and Therapy
In what researchers from the University of Chicago called one of the largest studies of African Americans with Inflammatory Bowel Disease (IBD), co-investigator David T. Rubin, M.D., FACG and team analyzed the type of diseases seen in the African Americans compared to Caucasians. They identified a few important differences in this population, suggesting African Americans were more likely to have extra-intestinal manifestations of their IBD, including joint pain and skin inflammation. Also, they reported that Crohn’s disease patients in the cohort were less likely to have small intestinal involvement.

Abstract

Researchers from Mount Sinai School of Medicine explored racial differences in the prevalence of severe fistulizing perianal Crohn's disease in cross-sectional study of all adult patients with Crohn’s disease treated with infliximab at The Mount Sinai Hospital. In the study cohort, African-Americans with Crohn's disease are significantly more likely than others, and Caucasians significantly less likely, to have severe fistulizing perianal disease.

Abstract

In a third study, researchers from the University of Maryland School of Medicine suggest that African American Inflammatory Bowel Disease (IBD) patients were less likely to use infliximab therapy than Caucasian IBD patients after reviewing data from the Premier Perspective Comparative Database. However lead investigator Mark H. Flasar, M.D. noted that these results “represent the preliminary step in a larger and more detailed analysis, and should be interpreted with caution.”

Abstract

Clostridium difficile: No Longer Just a Hospital-Acquired Infection; Linked to Longer Hospital Stays, Other Health Complications for Children
Researchers from Sinai Hospital in Baltimore retrospectively analyzed the changing epidemiological trends of patients with Clostridium difficile-associated diarrhea (CDAD) who were admitted to an acute care hospital. The results of their analysis suggest a changing shift in the way CDAD is acquired—from a traditional hospital-acquired infection to a community and long-term-care facility-based infection.

Abstract

In a separate study, researchers from the Mayo Clinic analyzed the National Hospital Discharge Survey database and suggest that despite increased awareness of C. difficile infection (CDI) in children and advancements in the management of CDI and infection and control practices, C. difficile-associated -more-
diarrhea remains a “major problem” in hospitalized children, and is associated with increased length of stay, colectomy, in-hospital mortality and discharge to a short-or-long-term care facility. Abstract

**Fecal Microbiota Therapy May Help Pediatric Patients with Recurrent CDI**

Dr. Sudhir Dutta and a team of physicians from Sinai Hospital-Johns Hopkins Program reported success after using fecal microbiota therapy to treat a case of recurrent *C. difficile* infection in a 20-month old male who was born premature at 27 weeks of gestation. After receiving donor stool from his mother via colonoscope in the right colon, the patient has now remained symptom-free with complete resolution of diarrhea, rectal bleeding and has consistently gained weight over the past three months. Abstract

**Heath Risks of Non-Compliance with Vitamin and Mineral Supplementation Post- Gastric Bypass**

The importance following doctor’s orders after bariatric surgery is highlighted in two separate case reports which describe how non-compliance with vitamin and mineral supplementation protocols could lead to nutritional deficiencies and related health complications, such as heart damage. Researchers from the University of Missouri report a case of a non-compliant patient who failed to maintain regular follow-up after undergoing bariatric surgery leading to severe vitamin and mineral deficiencies, while another case by researchers from Geisinger Medical Center in Danville, PA. describe a post-gastric bypass patient whose selenium deficiency caused cardiomyopathy. Abstract 1 Abstract 2

**Lunchtime media briefings in the ACG Press Room, Galileo 901, are planned on the following topics:**

**Monday, October 22, 2012, 12:45 PM PDT**

**“New Technologies Advance Treatment of Gastrointestinal Disorders”**

Highlights of new clinical science on emerging technologies that are advancing treatment of various gastrointestinal disorders, including electrical stimulation of the lower esophageal sphincter for treatment of GERD; confocal laser endomicroscopy for diagnosing Irritable Bowel Syndrome; P.O.E.M (peroral endoscopic myotomy) for the swallowing disorder achalasia; and experimental use of Hemospray™ for GI bleeding.

**Panelists:**
Edy Soffer, M.D., FACG, University of Southern California
Michael D. Crowell, Ph.D., FACG, Mayo Scottsdale
Julia Liu, M.D., M.Sc., FACG, University of Alberta
Stavros N. Stavropoulos, M.D., Columbia University
Timothy J. Laurie, M.D., Lutheran General Hospital, Chicago IL
John R. Saltzman, M.D., FACG, Brigham & Women’s Hospital

**Moderator:**
Walter J. Coyle, M.D., FACG, Scripps Clinic

**Media may access the New Technologies Press Briefing remotely on Monday:**
Toll-free Dial-in: 1-888-850-4523
Participant code: 424049

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**Tuesday, October 23, 2012, 12:45 PM PDT**

“Assessing Risks for Gastrointestinal Malignancies”

A focus on the groundbreaking science around the risk factors associated with colorectal cancer and esophageal cancer. The briefing will highlight new research findings on various risk factors related to colorectal cancer such as family history, endometrial cancer, and body mass index in African Americans. New science related to esophageal cancer risks also will be presented that demonstrates the protective effect of statins and whether bone-building drugs increase or reduce esophageal cancer risk.

**Panelists**

Prasad G. Iyer, M.D., M.S., Mayo Clinic Rochester
Niloy Jewel Samadder, M.D., Huntsman Cancer Institute, Utah
Siddharth Singh, M.D., Mayo Clinic Rochester

**Moderators:**

Carol A. Burke, M.D., FACG, Cleveland Clinic (CRC)
Yvonne Romero, M.D., FACG, Mayo Clinic Rochester (EsCa)

Media may access the GI Risks Press Briefing remotely on Tuesday:
Teleconference Access Dial-In U.S. Only
Toll-free Dial-in: 1-888-850-4523
Participant code: 424049

**MEDIA AVAILABILITY**

**Monday, October 22, 2011, 3:45 pm EDT**

ACG Press Room, Galileo 901

Lawrence J. Brandt, M.D., MACG
“Fecal Transplantation for Persistent *C. difficile* Infection”

Dr. Brandt who is presenting this year’s *The American Journal of Gastroenterology* lecture, “Fecal Transplantation for Persistent *C. difficile* Infection,” will be available for media interviews along with William D. Chey, M.D., FACG, Co-editor of *The American Journal of Gastroenterology*, in the ACG Press Room Galileo 901.

**About the American College of Gastroenterology**

Founded in 1932, the American College of Gastroenterology (ACG) is an organization with an international membership of more than 12,000 individuals from 80 countries. The College is committed to serving the clinically oriented digestive disease specialist through its emphasis on scholarly practice, teaching and research. The mission of the College is to serve the evolving needs of physicians in the delivery of high quality, scientifically sound, humanistic, ethical, and cost-effective health care to gastroenterology patients. [www.gi.org](http://www.gi.org) View releases on other research breaking at the ACG meeting at [http://gi.org/media/press-releases-for-acg-annual-scientific-meeting/](http://gi.org/media/press-releases-for-acg-annual-scientific-meeting/)

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