

Congress Review

Review of the United European Gastroenterology (UEG) Week Virtual 2021

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“LONGEST the best” was the catchphrase coined at the 29th Annual Meeting of United European Gastroenterology (UEG), hosted in the Austrian city of Vienna, the second congress of this speciality with a fully virtual attendance. Often called the ‘City of Music’ due to the influences of Mozart and Beethoven, UEG were able to orchestrate a sophisticated scientific programme over 3 days from a purpose-built TV studio alongside their global headquarters.

Attendees of UEG Week Virtual 2021 were comprised of colleagues from all continents, summing to near 8,500 delegates in 105 different countries. The scientific programme on offer was highly interactive, mitigating any barriers to disseminating knowledge imposed by a virtual congress. Faculty members from the Vienna studio encouraged their audience to engage and participate in discussions by utilising voting tools and question and answer functions. The learning platform was diverse, boasting a range of live sessions from abstract and

poster presentations to webinars and case-based discussions. This was part of an initiative mentioned by the UEG President, Axel Dignass, who considers, along with his successor, Helena Cortez-Pinto, currently the UEG Vice-President, that it is “a constant necessity to innovate and to change the way in which we deliver our strategic plan.”

UEG members can access on-demand recorded meetings from the 2021 congress, a definite benefit associated with the online shift in content delivery. In total, 782 presentations and 217 sessions, with contributions from 632 speakers, remain available. Highlights from these include symposia and webinars on the management of patients with obesity, nutritional approaches to managing gastrointestinal disorders, elimination of chronic viral hepatitis, and cutting-edge approaches to the treatment of rectal cancer. Alongside all this, Cortez-Pinto spoke in the closing ceremony about some of the abstracts she found of particular interest, describing the importance of maintaining strict

surveillance on patients with cirrhosis who have been treated with direct-acting antivirals. UEG Secretary General Magnus Simrén added to these highlights by spotlighting a multinational study investigating the presence of gastrointestinal symptoms in patients with COVID-19 who were hospitalised.

A selection of awards were handed out throughout the congress, recognising particularly significant contributions in the world of gastroenterology. The first of these went to Nicolas Richard, Rouen University Hospital, France, who received the Journal Best Paper Award for his winning article, entitled 'The Effectiveness of Rotating Versus Single-Course Antibiotics for Small Intestinal Bacterial Overgrowth'. The Research Prize was awarded by Luigi Ricciardiello, the Chair of the UEG Research Committee, who described the parameters for this honour as demonstrating "the best of the best in basic, translational and clinical research." For work on 'Repurposing Mitochondria Protective Targets for Adjuvant IBD Therapy', the awardee was Dirk Haller, Technical University of Munich, Germany, who will receive 100,000 EUR to fund his research. The most prestigious of the recognitions was the Lifetime

Achievement Award, which was presented to Michael Farthing for outstanding contributions to the UEG and gastroenterology for over more than 30 years. Rebecca Clare Fitzgerald, University of Cambridge, UK, and a fellow of Farthing's, delivered his laudation by describing how he has "inspired a generation of researchers." Crediting the lasting contributions he has made to societies such as the UEG, where he served as President, Fitzgerald spoke about how Farthing has pioneered the modification of structures within organisations and acted as a timeless ambassador for gastroenterology internationally.

As part of the closing ceremony, Dignass revealed that planning for the 30th Anniversary UEG Week, hosted again in Vienna in October 2022, is very much underway, and hinted at inclusion of a hybrid model of attendance. Looking ahead to after he departs from his second year in office, he concluded with excitement that "we will engage as one connected community in this hybrid world." Whilst this shows there is light at the end of the tunnel for in-person interaction, the scientific highlights that follow will illuminate to those who could not attend the most-coveted information from UEG Week Virtual 2021. ■

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UEG 2021 REVIEWED →



Psychological Distress and Quality of Life Associated Gas-Related Intestinal Symptoms

RECENT findings from a new survey assessing the impact of gas-related symptoms on quality of life revealed a correlation between higher burden symptoms and increased stress and anxiety. These results from the Intestinal Gas Questionnaire (IGQ) were presented at this year's UEG Week, which took place from 3rd-5th October 2021.

The new IGQ survey is a 17-question validated questionnaire assessing the severity of seven key symptoms related to gas production over the last 24-hour period. The survey also measures the impact of these symptoms on patient quality of life (QoL) in the last 7 days. Scored from 0 to 100, the IGQ combines these aspects to evaluate the burden of each individual's gas-related symptoms. The study presented used the IGQ survey to evaluate the prevalence and QoL impact of these symptoms on the general population of the USA, UK, and Mexico. The research also aimed to assess the demographic associations of observed symptoms and their correlation with physical activity and BMI.

The study involved almost 6,000 individuals from the USA, UK, and Mexico, who all participated in the quality-assured, secure internet survey to assess these aims. Olafur Palsson, Professor of

Medicine, University of North Carolina at Chapel Hill, USA, who was involved in the study, presented the survey results. The USA and UK saw similar IGQ scores of 14.5 and 13.7, respectively, with little disparity between the male and female groups. Mexico saw a significantly higher IGQ score throughout, with a total score of 26.0. Individuals from Mexico also consistently scored higher than those from the USA and UK in all seven assessed gas-related symptoms.

Palsson explained: "As we expected, gas-related symptoms are related to quality of life impairment and poorer wellbeing." The results clearly indicated a correlation between higher gas-related symptom burden and lower physical and mental QoL component scores, as well as increased anxiety and depression. Palsson went on to note that a relationship was not observed between these symptoms and BMI and physical activity. He concluded: "The most striking thing about our findings is that nearly all adults in the general population experience some daily gas-related symptoms." The significant differences between Mexico and the other countries involved strongly suggest that cultural, diet, or public health factors may influence gas-related symptoms, and future research will likely concentrate further on this observed result. ■



Meal-Related Abdominal Pain Frequently Experienced by 11% of the Population

ALARMING data from recent study has revealed that high rates of gastrointestinal discomfort are affecting the daily lives of multiple populations worldwide, and that meal-related abdominal pain affects one in 10 people. Research presented at UEG Week Virtual 2021, on 5th October, reported 40% of the global population experience recurrent gastrointestinal symptoms, and on routine check-up are reported as normal. Furthermore, 11% of the population experience abdominal pain while eating meals. Individuals who experience meal-related pain often suffer from other gastrointestinal symptoms as well, including bloating, diarrhoea, constipation, and feeling too full after eating. These disorders of the gut-brain interaction (DGBI) have substantial impact on society, categorised into over 20 subgroups. Although they are benign in not

leading to serious complications or affecting life expectancy, patients experience a significant daily impact on their lives.

Incorporating information from 33 countries, each with more than 2,000 participants, this global epidemiology study, conducted by the Rome Foundation, consisted of a survey distributed via the internet or in some countries, door-to-door interview collection. The data presented at UEG Week was based on the approximate 55,000 who completed this online questionnaire. Fifty-two percent of the overall dataset experienced abdominal pain in 3 months prior to questioning, 18% of which was not meal-related, 23% occasionally meal-related, and 11% frequently related to meals. Thirty percent of those who reported frequent

meal-related abdominal pain suffer from lower gastrointestinal symptoms such as constipation and diarrhoea, which is 10% and 20% higher than those who occasionally have meal-related pain and those who rarely do, respectively. Individuals who suffer from frequent pain while eating meals are more likely to suffer from depression (35%) compared with the other groups (24% and 17%, respectively).

Lead author Esther Colomier, Katholieke Universiteit (KU) Leuven, Belgium, and the University of Gothenburg, Sweden, believes that meal-related symptoms should be considered in future diagnostic criteria. She reported: “In China, Singapore, and Italy prevalence rates were the lowest, whereas the prevalence rates were clearly higher in countries such as South Korea, Turkey, and Egypt.” Researchers noted that it remains to be clarified why patients develop DGBI, but recognise there is a multifactorial profile of causation, with contribution from physiological, psychosocial, and early life factors. The main success of this study lies

with identifying a relationship between food intake and gastrointestinal symptoms, achieving the over-arching aim of determining global prevalence of meal-related abdominal pain. Investigators were also able to characterise individuals experiencing meal-related abdominal pain in terms of DGBI diagnostics, physical burden, frequency, quality of life, healthcare utilisation, and psychological distress.

The sample size of this study is an obvious strength, and brings interesting comparison geographically. The researchers were able to assess meal-related symptoms in all patients with DGBI, which is of major importance for improving and individualising future treatment approaches. “In clinical practice, assessing meal association in all patients with DGBIs should be of major importance for improving and individualising treatment,” were the words of Colomier. “Here, patients could benefit from a multidisciplinary care approach, including dietary and lifestyle advice, psychological support, and pharmacological therapy.” ■

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Pandemic Delays Cause a Drop in Colorectal Cancer Diagnoses

DRAMATIC decline of colorectal cancer (CRC) rates since the beginning of the COVID-19 pandemic have been recorded in a recent study presented at the UEG Week Virtual 2021 Congress. CRC is Europe's second largest cancer killer, with 375,000 cases newly diagnosed annually.

Research conducted across multiple hospitals in Spain found that when data from the first year of the COVID-19 pandemic was compared to the previous year, cases of CRC identified fell by almost two-thirds. Of the total 1,385 cases identified across the 2-year period, 868 cases (62.7%) were identified in the pre-pandemic year compared with 517 cases (37.3%) diagnosed during the pandemic.

This trend was mirrored in the drastic drop in colonoscopies conducted, with 24,860 carried out pre-pandemic falling to 17,337 in the first year of COVID-19. Subsequent analysis also found that those diagnosed with CRC during the pandemic tended to be older, with more frequent symptoms, an increased number of complications, and presented at a more advanced disease stage than cases diagnosed in the previous year.

"These are worrying findings indeed," stated María José Domper Arnal, Service of Digestive Diseases, University Clinic Hospital, Aragón

Health Research Institute, Zaragoza, Spain, and lead author of the study. "Cases of CRC undoubtedly went undiagnosed during the pandemic. Not only were there fewer diagnoses, but those diagnosed tended to be at a later stage and suffering from more serious symptoms."

Experts have suggested that the fall in diagnosis is due to the suspension of screening programmes and postponement of non-urgent colonoscopy investigations that occurred as a consequence of the pandemic. During the pandemic, more patients were diagnosed through symptoms instead of screening programmes: 81.2% of diagnoses compared with 69.0% in the previous year.

Diagnosis with serious complications, a sign of late-stage disease, increased significantly throughout the pandemic. Incidence of bowel perforation, abscesses, bowel obstruction, and bleeding requiring hospitalisation represented 10.6% of diagnoses pre-pandemic and 14.7% during the pandemic.

"CRC is often curable if it's caught at an early stage," explained Arnal. "Our concern is that we're losing the opportunity to diagnose patients at this early stage, and this will have a knock-on effect on patient outcomes and survival. We are likely to see this fall out for years to come." ■

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Increasing Incidence of Oesophageal Cancer in Dutch Adults

RESULTING in more than half a million deaths per annum, oesophageal cancer (EC) is the seventh leading global malignancy, with approximately 600 thousand new cases each year. The importance of this topic is emphasised by the World Health Organization (WHO) forecast for 2040, which predicts a further global increase. This presentation at UEG Week by Ali Al-Kaabi, Radboud University Medical Centre, Nijmegen, the Netherlands, discussed the associated burden of this increase, especially in young adults (under the age of 50 years). Analysing both of the most common forms of EC, oesophageal adenocarcinoma and oesophageal squamous cell carcinoma, the former is commonly associated with obesity and gastro-oesophageal reflux disease, whereas the latter is linked with alcohol and smoking.

The study was a population-based cohort design, including data on all newly diagnosed patients with EC in the Netherlands between 1989 and 2018. Adenocarcinoma and squamous cell carcinoma were both analysed. The overall participant count of 59,864 was split into age groups of <50, 50-74, and ≥ 75 years. Endpoints in the investigation were incidence as new cases/100,000 person-years, estimated annual percentage change (EAPC), and survival. Notably, 47% of the young adult group (aged 18-49 years) presented with incurable EC at the palliative treatment stage. Analysis of incidence discovered that oesophageal adenocarcinoma tripled in young adults over the 30-year period. Average annual increase in incidence began at 40 years of age in males, increasing at an average of 1.3%. Interestingly, increase began in the same age category of women (aged 40-49 years) but the average annual increase



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was higher, with an average of 3%. This discovery that EC has tripled over the course of three decades has been attributed by scientists to poor lifestyle choices such as an unhealthy diet, lack of exercise, and smoking.

Al-Kaabi made a point to recognise that whilst the reasons are unknown for this escalating trend, the EC risk factors that most likely contribute include growing ageing populations, urbanisation, smoking, and alcohol use. This investigation aimed to provide age-specific incidence data for EC in order to increase awareness in healthcare professionals, re-evaluate existing practices, and support further research. Al-Kaabi also shared that the relative survival in younger individuals has improved compared with older individuals, and this could be due to the increased likelihood of younger patients being treated with chemoradiotherapy and surgery that might increase their survival.

A limitation to the study was that young adults only made up 6% of the total participants, 78% of whom were male. This restricts the applications of the data in drawing conclusions, but promotes further study in the field considering a larger proportion in the age-group under scrutiny and exhibiting a more even gender split. "As far as we know, this was the first study reporting age-specific incidence rates for EC in a European population," concluded Al-Kaabi, delivering the key takeaways from the current study, also noting there is an increasing survival gap between young adults and the elderly. He stressed the importance of being aware of the symptoms of EC, as well as maintaining healthy habits. This was seen in his remarks on how adults under 50 years need to be aware of the symptoms of EC such as problems swallowing, heart burn, and indigestion, in order to have an earlier diagnosis and increase chances of survival, especially in patients at high-risk. ■