

Guest editorial

Gastroenterology

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Despite the notable morbidity and mortality associated with digestive diseases, gastroenterology remains a frequently overlooked and often poorly understood discipline. This is at odds with the public's fascination with the concept of gut health, best reflected by the everexpanding probiotic industry and the widespread popularity of scientifically unsubstantiated procedures such as colonic irrigation. It is therefore fitting that this issue of *CME* is focused on various common GI disorders and some of the recent evidence-based advances in pathogenesis, diagnosis and management. This edition is targeted at generalists managing these complaints and it is hoped that the articles will provide practical and useful information pertinent to daily practice.

Gastro-oesophageal reflux disease and chronic constipation remain common symptom-based disorders in the community and, while traditional therapies are effective in some, a sizable number of patients prove refractory. Both these conditions have significant impact on patient quality of life and the need for novel diagnostic and management strategies is pressing. Christo van Rensburg and Dave Epstein provide practical approaches to these conditions in clinical practice.

Following the pivotal work of Warren and Marshall, for which they were awarded the Nobel Prize in 2005, the association of *Helicobacter pylori* infection and a variety of GI disorders has become increasingly apparent. Eradication of this common infection has revolutionised the treatment of peptic ulcer disease. More recently its role in the pathogenesis of gastric cancer has received much attention. Elongo Fritz and Schalk van der Merwe review current opinion on this topical subject.

Despite several international guidelines published over recent years, the utilisation of colorectal cancer screening techniques remains disappointing, sadly as the timely detection and removal of adenomatous polyps will prevent the development of this all too common malignancy. With this in mind Herbie Schneider has provided a clear and concise update of current recommendations, which will inform both clinician and patient choices.

Inflammatory bowel disease (IBD), Crohn's disease and ulcerative colitis are increasingly viewed as multifactorial disorders owing to a complex interplay between genetic, microbial, environmental and immunological triggers. An explosion of research in the field of IBD over recent years has led to substantial advances in our understanding of disease pathogenesis and management. These latest developments are addressed by Keith Pettengell in his review of IBD.

The aetiology of diverticular disease, despite being an ancient malady, remains poorly characterised, and management continues to be taxing. Increasingly the recognition of an inflammatory component to this disorder has challenged traditional thinking. V G Naidoo provides a clinical approach to diagnosis and management of this common and increasingly topical GI disorder, as well as some insight into current controversies.

Last but not least, hepatitis B continues to wreak havoc in our country and remains an enormous health care burden, while the importance of hepatitis C is increasingly being recognised. Considerable progress has been made in both viral liver diseases. Cornè Kruger and Mark Sonderup have reviewed the latest evidence to provide an overview of recent advances in pathophysiology, diagnosis and management.

Disorders of the GI tract and liver frequently require medical consultation and the broad range of subjects reviewed in this issue reflects the enormous diversity of GI pathology. There remain of course many unsolved mysteries and the optimal management of most of these diseases continues to elude us. Fortunately good-quality research and burgeoning evidence-based medicine have resulted in many significant breakthroughs in the field, which offer our patients an opportunity for improved health care. The future looks promising.



