



Covering the Cover

Emerging therapeutics and relevant targets for chronic Hepatitis B

This comprehensive review evaluated emerging therapeutics and relevant targets in the management of chronic hepatitis B. The paper discuss that despite remarkable improvement in the virological, serological, biochemical, and histological response to current therapeutics, we are still far from meeting the therapeutic goals, e.g., clearance of HBV DNA/cccDNA in the serum/liver tissue and seroconversion of HBsAg to anti-HBs in the present antiviral era. The author reviews the HBV replication cycle-related, viral RNA interference-based, and host immune-mediated therapeutic targets and relevant anti-HBV agents which have been newly introduced and investigated in the preclinical and clinical fields. See page 210.

The effect of brain death and coma on gastric myoelectrical activity

This study aimed to measure the changes in gastric myoelectrical activity with electrogastrography (EGG) following brain death (BD) and compare the results to those from patients in a deep coma without BD. Fifteen patients with BD and nine in a deep coma were included. After an enteral nutrition solution the mean dominant frequency (MnDF), normal gastric slow wave ratio (%), tachygastria and bradygastria (%), power ratio and dominant frequency instability coefficient were evaluated. Patients with BD displayed tachygastria with this disturbance decreasing during the postprandial period (from 41% to 15%). None of the parameters between the groups were statistically significant. The study concluded that both patients with coma and BD might have gastric myoelectrical activity disturbances. See page 216.

Is there any association between colonic polyps and gastric intestinal metaplasia?

This retrospective case-control study investigated the association of colonic polyps with gastric IM in patients undergoing colonoscopy. The study included a total of

760 patients who underwent a colonoscopy, and 400 of them had colonic adenomatous polyps. The risk of gastric IM was 1.42-fold higher in the polyp group. An increased risk of gastric IM was also associated with higher grades of polyp dysplasia. See page 221.

Effect of probiotics on small intestinal bacterial overgrowth in patients with gastric and colorectal cancer

The association of small intestinal bacterial overgrowth (SIBO) with gastric and colorectal cancer prevalence and cancer symptoms was analyzed in a case control study including 112 gastric and 88 colorectal cancer patients. The effect of probiotic therapy on cancer symptoms was also investigated. The SIBO was tested positive in 63.0% of patients with cancer and 16.3% of controls. SIBO was associated with proton pump inhibitor use in patients with cancer. The probiotic therapy was associated with a significant improvement in gastrointestinal cancer-related symptoms. See page 227.

Immunohistochemical activity of Prohibitin-2 and Stomatin-Like Protein-2 in patients with ulcerative colitis

This study aimed to investigate prohibitin-2 (Phb-2) and stomatin-like protein-2 (Slp-2) expressions in patients with ulcerative colitis (UC) and healthy controls using the immunohistochemical (IHC) method. Ninety-five patients with UC and 38 healthy controls were included. Clinical and endoscopic activities of UC were assessed. Conventional laboratory activation parameters and severity of inflammation measures were used for the evaluation of histological activity. They found that IHC scores of Phb-2 were lower but Slp-2 scores were higher in the UC group. Phb-2 scores were positively correlated with clinical and histological activities. In the UC group, endoscopic activity scores, C-reactive protein levels, and sedimentation rates were also positively correlated with Phb-2 scores. Authors conclude that Phb-2 may serve as a valuable new biomarker for predicting the severity of all UC activity parameters. See page 233.

The relation of presenting symptoms with staging, grading, and postoperative 3-year mortality in patients with stage I–III non-metastatic colon cancer

The association of presenting symptoms with staging, grading, and postoperative 3-year mortality in patients with colon cancer was evaluated in a total of 132 patients. Symptoms prior to diagnosis were evaluated with respect to tumor localization, tumor node metastasis (TNM) stage, histological grade, and postoperative 3-year mortality. Constipation and abdominal pain were the two most common symptoms appearing first and remained most predominant up to diagnosis. The frequency of admission symptoms significantly differed with respect to tumor location, TNM stage and histological grade. Melena and rectal bleeding as the presenting symptom increased the likelihood of 3-year mortality significantly. See page 239.

Use of the gastro-laryngeal tube in endoscopic retrograde cholangiopancreatography cases under sedation/analgesia

This study aimed to analyze the effects of Gastro-Laryngeal Tube (GLT) use on intraoperative and postoperative hemodynamic parameters, comfort of the procedure, and patients' satisfaction in 80 patients who underwent an ERCP. The patients were randomly assigned to two groups with or without GLT tube. Both patients and endoscopists' satisfaction scores were significantly higher in GLT group. The incidence of desaturation during ERCP was significantly higher in patients without GLT tube. The study showed that sedation anesthesia application with GLT in ERCP was safer and more comfortable. See page 246.

Intrahepatic biliary cystadenoma—diagnosis and treatment options

This study aimed to establish a new diagnostic and therapeutic approach for a rare disease of liver cystadenomas. The study included 12 female patients who were primarily diagnosed with cystadenoma of the liver. Six patients underwent enucleation of the cystadenoma and 4 patients underwent liver resection. Complete enucleation or resection was not possible in 2 patients and malignant transformation occurred in these patients at follow up. The remaining patients showed no signs of recurrence. The study showed the only possible treatment of cystadenomas was radical surgical removal. In case of incomplete surgery, liver transplantation should be considered. See page 252.

Hepatic pathology of biliary atresia: A new comprehensive evaluation method using liver biopsy

The diagnostic value of intraoperative frozen and postoperative paraffin-embedded liver sections was compared and a new pathological grading system was proposed for biliary atresia (BA) in this study. The study included 81 infant patients who underwent surgery for BA. Bile duct hyperplasia was classified into three grades (B1–B3), and fibrosis was classified into four classical grades (F1–F4). The two grading system were corre-

lated, and there was a high (97.5%) concordance rate between intraoperative frozen and postoperative paraffin-embedded sections. The study showed new proposed pathological grading system may be useful for the diagnostic and prognostic assessment of BA and intraoperative frozen liver tissue biopsy samples represent a valuable and promising adjunct to the conventional postoperative paraffin-embedded sections. See page 257.

Cerebral hemodynamics in patients with cirrhosis

This study aimed to investigate the cerebral hemodynamic parameters in patients with decompensated cirrhosis and their relationship to the Child–Pugh and MELD scores. Study included 50 patients with decompensated cirrhosis and 50 healthy controls. The study used transcranial Doppler to investigate the cerebral hemodynamic parameters, namely the mean flow velocity of the middle cerebral artery, pulsatile index (PI), and resistive index (RI). Patients with cirrhosis had a lower mean flow velocity and higher PI and RI values. There was a positive correlation between PI and the Child–Pugh score, and PI, RI, and the MELD score. The study showed cerebral autoregulation might be impaired in patients with cirrhosis and cerebral resistance proportionally increases to disease severity. See page 264.

The importance of salivary cortisol in the diagnosis of adrenal insufficiency in cirrhosis

The study aimed to define the prevalence rate of adrenal insufficiency (AI) in stable 110 cirrhotic patients and determine the correlations of free cortisol and salivary cortisol with total cortisol. AI was present in 23 (20.9%) and 17 (15.5%) of all patients according to the total and free cortisol criteria. For basal and stimulated levels, salivary cortisol rather than total cortisol correlated well with free cortisol. The study showed that the diagnosis of AI on the basis of total cortisol measurement overestimated the prevalence of AI. Salivary cortisol was a promising alternative for the diagnosis of AI in cirrhotic patients. See page 268.

Is there any potential or additive effect of anemia on hepatorenal syndrome?

This prospective study investigated the role of severe anemia as a precipitant factor of hepatorenal syndrome (HRS) in a total of 29 cirrhotic patients with HRS, and 37 cirrhotic patients without HRS. Grades of ascites, Child–Turcotte–Pugh (CTP) scores, and Model of End Stage Liver Disease (MELD) scores were significantly higher in contrast to hemoglobin levels in patients with HRS. Hematocrit concentrations were significantly lower in patients with HRS than in those with non-HRS stable cirrhosis. There was a negative correlation between the hemoglobin–hematocrit and serum creatinine levels. In the logistic regression analysis, the hemoglobin levels and CTP and MELD scores were statistically significant for an onset of HRS. The study showed that anemia may contribute

to HRS and deteriorated renal function in patients with HRS. See page 273.

Five-year results of oral antiviral therapy in HBeAg-negative chronic Hepatitis B

This study aimed to assess the success rates of lamivudine, entecavir, and tenofovir, as well as the resistance rates, frequencies of HBsAg clearance, and risk factors for lamivudine resistance in a total of 191 patients with chronic HBeAg-negative hepatitis. The cumulative first-, second-, third-, fourth-, and fifth-year rates of virologic breakthrough during extended lamivudine therapy were 24%, 30%, 38%, 46%, and 54%, respectively. The rate of undetectable DNA at the 60th month of those who took lamivudine was 51%. In regression analysis, the positive HBV DNA at the sixth month, >41 years age, and baseline HBV DNA >170,500 IU/mL were independently associated with the development of resistance to lamivudine. See page 279.

Demographic characteristics of chronic pancreatitis patients in the era of endosonography: Experience of a single tertiary referral center in Turkey

This study aimed to investigate the etiology and clinical features of chronic pancreatitis in a Turkish population in the era of endosonography. The retrospective analysis included 168 patients who were diagnosed in a tertiary referral hospital. The most common etiological factor was alcohol abuse (39%). The average age was 46 years, and the male:female ratio was 4.2:1. The most frequent complication was diabetes mellitus (44%). One-third of the patients received various types of endoscopic treatment. During a mean follow-up period of 42±13 months, pancreatic cancer was detected in four patients. See page 284.

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