

The Quarterly Publication of ECCO
European Crohn's & Colitis Organisation

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Dear friends,

ECCO needs to amend its governance structure in order to meet the challenges of the future. This comes as no surprise since all successful developing organisations need to adapt to the demands of growth and expansion.

The first amendment of the ECCO structure took place in July 2004 during the annual summer meeting of the Governing Board. Renzo Caprilli and Geert D'Haens launched the Scientific and Educational Committee because at that time it was felt that ECCO needed to organize its operational activities more effectively. Now, six years later, we are again facing a number of new opportunities and challenges:

- 1) a rapid growth of (potential) members,
- 2) an increase in ECCO activities (workshops, guidelines, significant expansion of the ECCO Congress, corporate relations, biobanking, etc),
- 3) a request from other medical disciplines and colleagues to join ECCO (surgeons, paediatricians, nurses, radiologists, pathologists),
- 4) a changing ethical & legal landscape for medical societies and corporate sponsors,
- 5) a very successful and maturing medical journal (the JCC) and lastly
- 6) an interest from outside of Europe to cooperate with ECCO. You will agree with me that these are all symptoms of a flourishing organisation! It is essential to protect and nurture ECCO, and prepare it for the next years to come.

How can we do this best? We have spent the last months working on proposals, and discussing them with a broad range of our ECCO friends as well as outside professionals. During this years' summer meeting the Governing Board agreed on a second amendment of the ECCO structure.

In summary we propose to bring together the Educational Committee (EduCom) with the Scientific Committee (SciCom) into an '**Operational Board**' where *all* the operational activities of ECCO will be organised.

The reasons for doing so are as follows:

- i) the educational and scientific activities often overlap, thus the synergy between the EduCom and SciCom will be optimised,
- ii) the Operational Board consists of the *chairs* of each of the ECCO committees, enhancing effectiveness,
- iii) the Governing Board will deal with the governance and strategy of ECCO, leaving all the operational affairs to the Operational Board,

iv) we are now able to invite other medical disciplines into the Operational Board as full committees: N-ECCO (nurses), P-ECCO (pediatricians), S-ECCO (surgeons), Y-ECCO (young ECCO).

The Operational Board will be chaired by the ECCO secretary and co-chaired by two other Governing Board members 1) the Educational Officer (former Chair of EduCom) and 2) the Scientific Officer (former Chair of SciCom). In addition, the Governing Board will be advised by a new '**Strategic Board**' consisting of our National Representatives, honorary members, a Global Relations Committee and other stakeholders.

We are quite confident that these amendments will further strengthen ECCO to remain an innovative and flexible organisation that you will enjoy being a member of.

A full description of our proposals will follow in issue nr 4 of the *ECCO News*, and will also be discussed during the **Extraordinary General Assembly** in Barcelona during the UEGW. We hope to see you there!

Lastly, prepare yourself for our **10 year ECCO Anniversary** in 2011! We will soon inform you about the range of activities planned, especially during our ECCO Congress in Dublin. We are so proud that after 10 years we have such a successful organisation that is living up to its mission statement we formulated in 2001. Please enjoy this issue of the Newsletter, and hope to see you soon!

Warm regards on behalf of Jean Fred, Simon, Severine, Herbert, Janneke and Matthieu,

DAAN HOMMES

On Thursday August 26 we were shocked by the news of the sudden loss of our dear friend and colleague **Marc Lémann** (Paris, France). Marc has played a exceptionally valuable role as a scientist and gastroenterologist, not only in the global IBD community, but especially in the GETAID and ECCO. More importantly, Marc was a beloved friend of us who will be greatly missed. We wish his family and friends courage in this exceptional time of adversity. We will always remember Marc.



Since this dreadful news reached us after the publishing deadline of this issue, we will honor Marc in our next ECCO News.

The Governing Board



Frank Rummele, Tamás Molnar and Walter Reinisch in the Panel – listening to Andreas Sturm via satellite from Germany.

Regional Meeting on IBD in Budapest

In mid April, a Regional Inflammatory Bowel Disease meeting, sponsored by Ferring, was held in Budapest.

The focus was on management of IBD today, epidemiology, current treatment options and patient commitment to therapy.

The Meeting also happened to coincide with the first day of the Icelandic volcano's pillar of ash that put most of the European airplanes on the ground.

Many attendees came from the Eastern part of Europe, which was not affected by the ash early on. Therefore most of them managed to arrive to the Meeting.

But several speakers from the West were unable to come.

Modern technology came to the rescue – several of the talks could be given anyway. This was possible to achieve thanks to video and audio links via satellite.

Web-based search for an east-west gradient

The Committee Chairman, Dr Laszlo Lakatos, greeted all the delegates welcome to Budapest.

– IBD used to be a rare disease in Eastern Europe – but it isn't any longer, he said.

Walter Reinisch had to step in for the other Committee Chairman, Severine Vermeire from Belgium. Then the first session titled *IBD Epidemiology* started.

The first speaker was Pia Munkholm, who talked about the new EpiCom study, which aims to find out if there is an East-West gradient in IBD prevalence, caused by environmental factors.

It's a prospective population based inception cohort, and 14 countries with 24 sites participate from the West and eight countries with 10 sites participate from the East. The registration is web-based on www.epicom-ecco.eu.

– Every morning before I go to work, I check the database – and every morning

I find a new patient there, Dr Munkholm said.

Data from the Study will be available in 2012.

IBD incidence varies

Dr Munkholm gave her speech from Copenhagen, and it was presented in real time to the audience in Budapest on a big screen. This worked unexpectedly well, also with the questions and answers that followed her talk.

The next speaker, Tamás Molnar, was physically present in Budapest. His topic was IBD across CEE.

CEE (Central and Eastern Europe) is a term describing former communist states in Europe, after the collapse of the Iron Curtain in 1989–90. CEE includes all the Eastern bloc countries west of the post-World War II border with the Soviet Union, the independent states in former Yugoslavia and the three Baltic states. ➡

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Laszlo Lakatos



Tamás Molnar



Walter Reinisch

The epidemiology for IBD in these countries varies.

– In Hungary the incidence is still rising, in Croatia CD is quite stable and in Poland we see a high incidence for both UC and CD – but UC is more common, Dr Molnar said.

Among developed nations, when IBD is emerging, UC is typically more common at first. But after 20 years CD generally overtakes. In CEE the incidence for CD is rising at present.

Treatment varies

The management of IBD is different in CEE, with various treatment guidelines and principles.

– TB is an important factor in Eastern Europe, and may affect the use of anti-TNF:s, Dr Molnar continued.

The cost for anti-TNF:s is another issue. Several patients do not get any of them.

– IBD requires a multidisciplinary team approach, and this is not always the case across Europe. Differences between treatment in Western and Eastern Europe do not always lead to “best practice” being followed.

Dr Molnar concluded with an example from Lithuania, where 11% of IBD patients at present receive biologics.

– But they have a very low incidence, so it doesn’t affect the total cost – yet! But it is probable that the incidence will rise in the future there too...

Worrying figures of paediatric IBD

IBD incidence has increased in the western world since World War II, but it seems that we now are at a plateau, said Frank Rümmele.

He continued by showing a slide that showed the incidence of IBD in children in Canada.

– This is very interesting. We can see that UC is stable – but CD is rising. We can also see that the very young children are getting more affected by IBD. All of this is very worrying, he said.

Paediatric CD – i.e. patients under 16 years of age – has unique characteristics in comparison with adult onset CD.

– Paediatric patients have more colon involvement, and less ileal involvement. They also have a faster development into stricturing disease – and that also worries me, Dr Rümmele stated.

So are there possibly paediatric specific genes for the disease? Dr Rümmele thought there might be different genetic factors, and two studies on the subject are at present ongoing.

The efficacy of Infliximab in paediatric CD is high – 70–95% clinical remission – for induction therapy. For maintenance therapy it is lower, 50–65% clinical remission.

– The opportunity for treatment is early – which pushes us to higher use of immunomodulators and biologics in paediatric IBD, Dr Rümmele summarized.

First line treatment of mild to moderate UC

Next session focused on the treatment of UC in 2010.

Dr Cathryn Edwards was stranded at home in Britain and therefore also had to give her talk via video link. It concerned 5-ASA.

– It’s essential treatment for all patients with UC. It’s inducing remission in active disease, maintains remission and also serves as cancer chemoprevention, she said.

Therefore 5-ASA is first line treatment for mild to moderate UC. The site and severity of the disease will affect the mode of delivery, Dr Edwards continued.

For left sided and extensive disease, oral mesalazine is effective in reducing remission.

– Once daily dosing is equivalent to twice daily, she stated.

Dr Edwards pointed out that systemic corticosteroids are appropriate if symptoms of active colitis do not respond *rapidly* to mesalazine.

– Severe left-sided/extensive colitis is usually an indication for hospital admission for intensive treatment with systemic therapy.

Compliance is important

Dr Edwards also said that she had a subjective feeling that we switch to steroids earlier in Europe than in the USA.

– I would suggest this: Review at 2 weeks, and switch if patient fails to improve.

The goal is steroid-free remission.

– We see clinical relapse in up to 75% of cases, but this figure can be halved with oral 5-ASA, she claimed.

Patient’s compliance is an important factor.

– If you have a less than 80% compliance with the drug, your risk of relapse is five times higher.

She also pointed out that it has been proven that patients are more compliant when they are on a one dose per day regimen.

ECCO questionnaire on IFX

Infliximab is the single biologic labeled for use for UC in Europe.

Walter Reinisch talked about ECCO versus government guidelines on biologics for the disease. He referred to a study on a Swedish and Danish population that showed that – in severe UC – the colectomy rate after just one infusion fell significantly, compared to placebo. ➡

– The EU label and the ECCO guidelines both recommend Infliximab as third line treatment, he said.

But there are some health inequalities, regarding the availability of the drug for UC. Dr Reinisch told the audience about a questionnaire that ECCO has sent to all the national representatives on the subject.

– It showed that IFX is available in all member states, except for Bulgaria. In Switzerland there's a limited use for one year. In UK it is only permitted in hospitalized acute severe patients. It is *not* allowed in chronic active UC in an outpatient setting.

Several studies have showed that there is a higher rate of IFX efficacy in moderately to severe UC, compared to only severe.

Call for standardization of treatment for UC

Dr Reinisch also talked about mucosal healing, a subject that was touched upon by Axel Dignass in his talk on bottom-up versus top-down strategy for severe colitis.

– Patient with pancolitis have a substantial risk (60%) to go to colectomy. UC is a systemic disease that needs potent treatment, and we can speculate that mucosal healing will keep the patient longer in remission. It might change the course of the disease, said Dr Dignass.

He therefore thought that top-down approach should be used for patients with severe UC.

But there are benefits and disadvantages for both of these therapeutic approaches.

– Top-down gives a better and more rapid disease control, improves Quality of Life and is cost-effective if you consider that the patient is less absent from work and have less complications.

– But it also includes a risk of over treatment; there can be other complications of therapy like neoplasias and opportunistic infections. This of course leads to *higher* costs – and the medication itself is also expensive, Dr Dignass stated.

He ended his talk by suggesting that we improve and standardize our treatment of UC.

– We have patients in large numbers that do not receive immunosuppressants, despite being qualified!

IL6 an effective target

There are no less than 242 studies ongoing in the world in order to do this – i.e. improving the treatment of UC.



Andreas Sturm pointed out this fact in his talk on the future treatment of the disease.

– The therapeutic aims are as follows: Fast improvement of symptoms, maintaining remission or reduction of worsening – and to avoid complications.

Based on our increased understanding of UC pathophysiology, several new promising therapeutic modalities will enlarge our medical armamentarium. Biological therapies with proven efficacy include anti-TNF strategies, anti-IFN- γ antibodies and anti-IL-6-receptor antibodies.

– It has been shown that IL-6 is an effective target. IL-6 acts earlier than TNF, and has broader effects, said Dr Sturm.

Basiliximab and visilizumab represent other ways to block TNF. But both only help less than 50% of the patients. Budesonide is one of the most interesting agents for mild to moderate UC, according to Dr Sturm.

In the future, new formulation will increase the efficiency of the current drugs – and enhance the adherence of our patients, he concluded.

Need to stratify the patients

Another topic for the future is personalized medicine. Or can we start this today? Severine Vermeire talked on the subject.

– We need to balance the treatment between risk and benefit. We don't want to overtreat – but we don't want to under-treat either. Whom to give which therapy? Therefore we need to *stratify* our patients, and then we need markers. We can stratify them on disease course, response to therapy and complications, she explained.

Young age at diagnosis is an indication among several for aggressive disease.

– We need a scoring system for this – and the Rheumatologists already got just that!

Dr Vermeire showed the audience a score for disease progression in rheumatoid arthritis.

– We are also working on this, she continued and described IPNIC – International Program to develop New Indexes for Crohn's Disease. The working group for IPNIC will have their 2nd meeting in Paris, September 14, 2010.

Predictor for non-response found

25% of the patients will be non-responders to anti-TNF therapy.

– We don't know *why*, but we have found a mucosal gene signature (IL13R alpha 2) that we can use to *predict* non-response, Dr Vermeire revealed.

So patients at young age, perianal disease, extensive small bowel disease are the patients that should be given top-down therapy.

– This represents a kind of personalised medicine, she summarized.

Dr Vermeire was also one of the lecturers that were not personally present in Budapest, and she took time to congratulate Ferring for being able to manage the situation so well.

All the delegates *ECCO News* talked to during the meeting in Budapest shared this view.

PER LUNDBLAD
Senior Writer

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6th Annual Congress of ECCO



February 24 – 26, 2011
The Convention Centre Dublin (CCD)

See you in Dublin!



ECCO Educational Workshop in Brazil

This workshop took place in São Paulo, South of Brazil, on June 19th, 2010. It was organized by ECCO in collaboration with the Brazilian Group of Inflammatory Bowel Disease (IBD).

This was the first ECCO Workshop outside Europe and the expectations were very high. In fact, it was a great opportunity for the ECCO educational effort to implement the consensus and the guidelines on Crohn's disease (CD) and ulcerative colitis out of Europe.

The organization of the course was excellent and carried out in a very friendly and warm atmosphere. The faculty included Rami Eliakim and Fernando Magro from EduCom and Anderson Damião, Eduardo Lopes Pontes, Marta Machado, Sender Miszputen, Genoile Oliveira Santana, Cryla Zaltman, and Flávio Steinwurz as local faculty speakers. The latter covered the main regions of this immense country.

The one day workshop program was based on the discussion of clinical cases and emphasized the main topics involving diagnosis and treatment. A collective effort to deliver take home messages was made.

The workshop started with an introduction and explanation about ECCO's organization, aims and guidelines structure by Fernando, followed by five cases included in the program, and a state of the art lecture by Rami concerning guidelines on opportunistic infections and vaccinations. Most of the different aspects of IBD were covered: pouchitis, fulminant colitis, surveillance and chemoprevention, fistulizing disease and new onset ileocecal of CD.

The presentations and discussions were interactive and profound. The official language was English, however simultaneous translation in Portuguese was available. We would like to stress Flávio's efforts and collaboration in creating a friendly, enthusiastic environment.

The workshop was attended by 150 participants from different regions of Brazil. Most of them were surgeons and proctologists, transforming the sessions very



Flávio Steinwurz



Cryla Zaltman



Eduardo Lopes Pontes



Adérson Omar Mourão
Cintra Damião



Fernando Magro



Rami Eliakim

interesting from the surgical point of view. Most colleagues revealed their delight for the clear and helpful messages given by the speakers at the end of the meeting.

Our aim of spreading evidence based guidelines abroad and implementing their use in

order to optimize the care of patients with IBD was achieved in Brazil.

FERNANDO MAGRO
RAMI ELIAKIM

Scientific Committee (SciCom) Report

MATTHIEU ALLEZ, EDOUARD LOUIS, ANDREAS STRUM, MIQUEL SANS,
SILVIO DANESE, PIA MUNKHOLM

The SciCom supports and promotes many scientific activities launched by ECCO members. After a brief review of these activities, we herein describe more precisely the organisation of present and scientific workshops.

The SciCom is continuously renewed. Silvio Danese has been serving in the SciCom for the last three years, bringing bright ideas, a great spirit and an unlimited energy. He will soon step down. Five candidates (young ECCO members below 40) applied to the SciCom election. We are very pleased to welcome on board this year Arthur Kaser from Austria, a very bright and motivated scientist and clinician in the IBD field.

Support to Clinical trials

Continuing projects supported by ECCO through SciCom include ASTIC (autologous stem cell transplantation for Crohn's) and METEOR (methotrexate for refractory ulcerative colitis). ECCO has agreed a project grant to the International Inflammatory Bowel Disease Genetics Consortium Study and will support the respective activities. The ORIGIN study is a very ambitious study designed to test the hypothesis that dysbiosis precedes the onset of Crohn's disease, by examining the microbiota of first degree relatives of people with Crohn's disease. The recruitment of centers should start in September.

Fellowships, Grants and Travel Awards

ECCO tasks include the promotion of scientific projects in IBD. Such promotion includes intellectual input, funding and joint training, using ECCO-defined criteria. To fulfill this core principle, ECCO offers Fellowships, Grants and Travel Awards to encourage young physicians in their career, facilitate interaction between IBD investigators across Europe and to promote innovative scientific research in IBD in Europe. Detailed information, eligibility and submission process on Fellowship, Grants and Travel Awards can be found at: www.ecco-ibd.eu/sci_comm/fellow_grants.php?navId=19

Scientific programs

This year the United European Gastroenterology Week (UEGW) will be held in Barcelona, Spain.

SciCom had major input in the scientific programme of UEGW. Representatives within the UEGF 2010 Scientific committee are Yehuda Chowers (ECCO representative within UEGF Scientific Committee) and Severine Vermeire (independent member of UEGF Scientific Committee).

Several IBD sessions will focus on current treatments, including early introduction of immunosuppressive therapy in Crohn's disease and how this impact the natural history. Furthermore, there will be a session on cutting edge areas such as post-operative prevention with biologics and when to stop biologics.

In addition, there will be an exciting session entitled *IBD therapies: From concept to clinic*, in which the most promising biological targets and the new drugs that are about to hit the clinic will be discussed. As usual, a basic science session will cover the recent advances in IBD pathophysiology, including genes, environment and mucosal immune response. Also, an entirely novel session entitled *Tricky topics in IBD* will cover the management of IBD arthropathies, anemia, and provide practical aspects what to do to avoid and to manage infections. Finally, an entire session on *IBD and cancer* aims to cover the basic aspects and how to deal clinically with this dilemma, from the surveillance to the colectomy.

Worth of note is that this year two IBD abstracts will be presented in the plenary session and Paul Rutgeerts and Hans Clevers will give talks in the plenary session on IBD therapies and on stem cells. So... we are looking forward to seeing you at UEGW in Barcelona!

See list of IBD sessions on next page.

EpiCom

The Epidemiology group of ECCO (EpiCom) has initiated a web-based East-West project, establishing a new cohort to investigate the incidence, prevalence

and impact of IBD in Eastern and Western countries of ECCO. The overall aim of this study is to investigate whether there is an east-west-gradient in European countries in the incidence of IBD, and if the difference is being caused by environmental factors. Inclusions will be performed on the full year 2010, and the follow-up period will run until 31.12.2011. On June 29 2010, 362 patients have been included. Download current incidence throughout Europe and protocol at www.epicom-ecco.eu.

ECCO Scientific workshops: toward a standardized process

ECCO and its SciCom organised a first pathogenesis workshop on anti-TNF failures in 2009. This first workshop was at the same time a big success and the occasion to think about optimal organisation for such workshops in the future. It was a big success because a large number of ECCO members participated and gave input in the process and because, for this very first experience the working group, lead by Matthieu Allez et Yehuda Chowers, could finalize a manuscript, now published in JCC and which will certainly be a key reference in this field for the future.

During all the process of the fist workshop, the ECCO SciCom has had interactive discussions and reflections about the process itself and its potential outcomes aiming at improving it for the future. These improvements were implemented for the organisation of the second workshop which is currently ongoing and the SciCom is now able to propose a standardized, optimized process that will be used in the future for the next workshops. The purpose of the present short paper of the following contribution is to present to ECCO members the general philosophy, aims and standardized process of these ECCO workshops, now called scientific instead of pathogenesis workshops. It also aims at explaining to ECCO members the importance these workshops will have in the future for ECCO visibility but also in the field of ECCO sponsored teaching and research.

IBD Sessions at UEGW 2010 in Barcelona:

Early immunosuppressive therapy in Crohn's disease: Why? When? How?	
	Julian Panes, Spain, Rami Eliakim Israel
Natural history of Crohn's disease	Tina Jess, Denmark
How can we change disease progression?	Peter Irving, UK
How can we prevent postoperative relapse?	Peter de Cruz, Australia
Biological treatment: When should we stop?	Edouard Louis, Belgium
Loss of response to anti TNF therapy: What does it mean and how should we manage it?	Ben Horin Shomron, Israel
IBD therapies: From concept to clinic	
	Simon Travis, UK, Peter de Cruz, Australia
Steroids: Past, present and future	Yehuda Chowers, Israel
Severe pediatric UC and related corticosteroid resistance	Dan Turner, Israel
Therapeutic drug monitoring in clinical practice	Mark Ainsworth, Denmark
New drugs about to hit the clinic	Severine Vermeire, Belgium
IBD pathogenesis	
	Kostas Papadakis, Greece, Miquel Gassull, Spain
Similarities and differences between CD and UC: A pathogenetic approach to IBD	Silvio Danese, Italy
Genetics and environment: How do they contribute to global variation of disease ?	Miquel Sans, Spain
Immune homeostasis in the gut: How does it work?	Andreas Sturm, Germany
Free papers	
Gut microbiota: The good, the bad and the ugly	Joel Dore, France
Dysplasia and cancer in IBD	
	Pia Munkholm, Denmark, Christophe Gasche, Austria
Mechanisms of inflammation-associated carcinogenesis	Michael Karin, USA
IEX-1 is a functional feedback regulator of NFkB	Alexander Art, Germany
MyD88 regulates tumor immunity during colitis-associated tumorigenesis	Stefan Fichtner-Feigl
Detection and surveillance for dysplasia and cancer in IBD	Matt Rutter, UK
Dysplasia and colitis: Do you or don't you recommend a colectomy?	Willem Bemelman, Netherlands
Tricky topics in IBD	
	Jonas Halfvarsson, Sweden, Severine Vermeire, Belgium
Management of IBD arthropathies	Sanroman, Spain
Anaemia and IBD: Collateral damage or wilful neglect?	Arthur Kaser, Austria
IBD and pregnancy: Medication and mode of delivery	Janneke van der woude, Netherlands
Avoiding and managing infection in IBD	Jean-Francois Rahier, Belgium

General philosophy and aims

The main idea of the first ECCO pathogenesis workshops has been to gather and share experience of experts, clinicians and younger scientists across all Europe (and beyond) regarding key issues in inflammatory bowel disease. Beyond that it has rapidly become clear that generating a manuscript that would put together the literature review made during the process but also the ideas and views generated by the discussions and the interaction would be of high value. Indeed, this would not only be a review paper on an important topic but also the fruits of a collegial European thought bringing something unique to the paper. Finally, ECCO and its SciCom realized that the process could even go further by trying and editing outstanding unsolved questions relating to the topic of the workshop and by favouring the development and sponsoring by ECCO of further researches tackling these questions.

Over the first two years of the ECCO pathogenesis workshop (scientific workshop), we have thus gone from an interactive discussion and sharing of experience among ECCO members towards a standardized and structured annual process, with a specific schedule, starting by the identification of relevant and important topics, followed by interactive thematic discussions, literature review and discussion, manuscript writing, plenary presentation and the definition of outstanding unsolved question edition.

Topic selection:
choosing highly relevant issues for IBD

This is the task and responsibility of the ECCO SciCom to select an important topic, relevant enough to mobilize time and energy of ECCO members during one year of process. The chosen topic has to deal with pathogenic and basic science features but must be clinically relevant

and make a link between basic and clinical research. ECCO SciCom also chooses at that moment two senior experts and one to two younger motivated fellows to lead the whole process. They form the steering committee of the workshop.

The choice of the topic is made on a yearly basis during the SciCom meeting held in October during UEGW.

First expert meeting:
small committee general brainstorming

ECCO SciCom designates European and non-European experts in the field of the selected topic and invites them to join in a first brainstorming meeting. During this meeting, lead by the steering committee, the key aspects that will be tackled within the topic must be identified and clearly formulated. A series of important questions relating to these aspects has also been suggested. At the same meeting, the assembly designates the leaders of each subgroup. They will be in charge of the organisation of the work in their subgroup tackling one of the specific questions chosen by the assembly of experts. A couple of young (potentially Y-ECCO) and older leaders will be favoured for each group.

This meeting is being held in February during the main annual ECCO congress.

Call and selection of ECCO members: favouring effectiveness and broad European representation

Right after the ECCO congress a call is made to all interested ECCO members for their potential participation at the workshop. In this call, the content, the process and the objectives of the workshop are described. The interested members answer to the call by giving their preference for one or two questions to be tackled, by describing their interest and potentially their scientific production in the field and by committing themselves to work all along the process for the success of the workshop and according to pre-specified objectives.

The objective of the selection of members who will participate to the workshop is to get working subgroups that will function optimally. To achieve that goal, a critical size must not be passed. Therefore, unfortunately, not all motivated and interested people can be selected but are welcomed for future workshops. The selection process is made by the SciCom under the lead and proposition of the steering committee. This selection is

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based on experience and motivation of the candidates but will also try and keep a broad European representation, mixing young scientist and clinicians (particularly Y-ECCO members) with older and more experienced ones.

This selection is made in March after ECCO congress.

First working subgroups meeting: Identification and formulation of key questions

This first working subgroup meeting is organised by the leaders of the different subgroups. They will invite the selected members of their groups to join them for a working session at DDW in May. The main aim of this working session is to come out with specific questions to be tackled by their subgroup. These questions have to be very precise and will be clearly formulated in a written report made by the leaders of the group. This is a very critical step, since the whole workshop process will be question-driven. Each member of the working subgroups will receive one or several questions to work on. During the months of May and June, these questions will then be circulated by e-mail among other groups' leaders and the steering committee to disclose and solve potential overlaps. The all list of questions for each group will then be confirmed by the group leaders and notification will be made to each group member that they can start working on the allocated questions. Their task is then to critically and extensively review the literature over July and August to generate a first draft answering their specific questions and identifying important unsolved issues in this field. These drafts will then be communicated to the groups' leaders in September and then circulated among the other groups' leaders in preparation of the next plenary meeting.

Plenary meeting of the working groups: an open large-committee discussion

This meeting will be held in October during UEGW. This is a very important meeting because it is the only occasion when all working groups will meet and interact together. This meeting will also be open to non participants, including representatives of the pharmaceutical and diagnostic industry, to further increase interaction and exchange ideas. During this session, the leaders of the group will present the current content of their work through a structured path, including 1) the identi-

fication of the key questions, 2) the literature review on these questions, 3) the critical analysis of this literature and 4) the identification of outstanding unsolved questions. After this meeting, the leaders of the group have the responsibility to take into account the elements of the discussion and to implement their draft.

Final plenary presentation: delivery of the major statements and communication of the outstanding unsolved questions

This final presentation will occur in February during ECCO congress during a specific session of the ECCO congress devoted to the workshop. Before this meeting the leaders of the groups have the responsibility to finalize the manuscript of their group following for each question the pre-specified format including, 1) literature review, 2) critical appraisal of the current status of knowledge and 3) identification of outstanding unsolved questions. These manuscripts will be forwarded to the steering committee by the end of December, at the latest. The steering committee has the responsibility to put together these manuscripts and to write general introduction and conclusions and also edit an official list of unsolved questions.

Second ECCO scientific workshop on Mucosal Healing

The second ECCO scientific workshop is currently underway. The chosen topic is "mucosal healing" and organized by Edouard Louis, Florian Rieder and Andreas Sturm. Obviously this topic has gained a major interest over the last ten years. In the early nineties, a few landmark studies had shown that it was not beneficial to the patient to try and reach endoscopic remission beyond clinical remission. However, it was at the time steroids were used to achieve remission in Crohn's disease. In the late nineties and at the beginning of the year 2000, it became clear, while using immunosuppressant and above all anti-TNF, that mucosal healing was achievable in a substantial number of patients and that, most importantly, it would influence further disease outcome (including relapses, hospitalisations, surgeries...). In ulcerative colitis, the importance of mucosal healing has been recognized earlier. This is probably because it had been achievable in a majority of patients using conventional therapies (including 5ASA and steroids) and also because it was easier to assess.

However, there is still a long way to go before we understand perfectly all the issues and relevance of mucosal healing in both diseases. That is why ECCO has decided to launch its second workshop on this thrilling topic. The workshop process has started at last ECCO meeting in February in Prague and will stretch till next ECCO meeting in Dublin in February 2011 where the final statements will be presented in a plenary session.

During a first meeting in Prague in February 2010, gathering a dozen of experts, the key topics to be tackled by the workshop were selected and the head of the working subgroups were chosen. These key topics are: 1) mechanisms of mucosal healing, 2) Assessment of mucosal healing by biomarkers, endoscopy and imaging, 3) impact of mucosal healing on the disease course, 4) therapeutic strategies to enhance mucosal healing. After an ECCO call early this spring, interested and motivated ECCO members applied and a selection was made based on experience, motivation and also trying to maintain broad national representations.

The selection process was decided in order to keep number of participants within a limit allowing optimal functioning of the working groups. These working groups then met in New Orleans in May 2010 during DDW and each group selected a series of practical and relevant questions to be addressed within their topic. These questions have been allowed to the different members of the working group who are now in charge of reviewing the literature and writing a first draft answering the selected questions. These drafts will be reviewed in September and a plenary discussion will occur in October 2010 during UEGW in Barcelona. After this plenary discussion, the manuscripts will be finalized and the final statements including also identification of outstanding unsolved issues will be presented at the ECCO meeting in Dublin.

Importantly, beside the manuscript, which will represent a key reference in the field of mucosal healing in inflammatory bowel disease, the working group will communicate a list of these outstanding unsolved questions that should be tackled by collaborative European research in the future. Particularly, ECCO will encourage the submission of Grants and Fellowship demands based on researches approaching these unsolved questions. ■

EpiCom Meeting in Copenhagen



The Epidemiologic Committee in ECCO (EpiCom) is conducting a web-based study in order to find out if there is an East-West incidence gradient in IBD in Europe caused by environmental factors.

A meeting was held on the 8th of June in Copenhagen, in connection with Nordic Digestive Disease Week.

Professor Pia Munkholm is Head of EpiCom.

– We had a meeting earlier this year in Prague, so this was the second one, she explains to *ECCO News*.

Rapid increase of inclusion

At the time for that meeting there were only four patients included in the database.

– Now there are more than 300 patients included, says Dr Munkholm.

The meeting was opened by Dr Munkholm counting the 52 persons present. Some of these had come to Copenhagen only for this meeting.

– That is a proof of the great interest in this study, she states.

Then an overview of the more than 300 patients included followed. Dr Munkholm pointed out that some countries are doing very well in the inclusion rate, and some are not.

Johan Burisch stressed the importance of contacting *all* the GP:s and the specialists in the catch-up area, to strengthen the inclusion of the inception cohort.

New members

Some new countries have joined the study. One of these is Moldavia, for which Professor Ion Miha is going to include patients. Svetlana Turcan represented him at the meeting in Copenhagen.

Another country is Romania – Professor Adrain Goldis, represented by Natalia Pedersen at the meeting.

Perhaps the most surprising inclusion in the study was the city of Wuhan, China.

– This is the first inception cohort from Wuhan, and they have already included eight patients, says Dr Munkholm.

Professor Bing Xia is in charge in Wuhan, but he is represented in EpiCom by Professor Michael Kamm, Melbourne, Australia.

All these new representatives presented at the meeting their country, the catch-up area and current IBD incidence and therapy.

– We welcome you so much, and we are happy to have you on board, said Dr Munkholm at the meeting.

Local epidemiology

– These are the first 26 centers in Europe and China doing epidemiology together in ECCO EpiCom, Dr Munkholm explains. A paper about the database will appear this fall in *JCC*.

– For the future our aim is that members should be able to access the database, and do their own local epidemiology trials, she finally says to *ECCO News*.

PER LUNDBLAD
Senior Writer

Fellowships & Grants

ECCO's tasks include the promotion of scientific projects in IBD. Such promotion includes intellectual input, funding and joint training, using ECCO-defined criteria.

To fulfil this core principle, ECCO offers Fellowships, Grants and Travel Awards to encourage young physicians in their career, facilitate interaction between IBD investigators across Europe and to promote innovative scientific research in IBD in Europe.

Fellowships are created for individuals younger than 40 years, who submit an original research project, which they wish to undertake abroad in a European hosting laboratory and/or department who has

accepted to host and guide the fellow for the duration of the fellowship (one year) and who is responsible together with the fellow for the successful completion of the project.

Fellowships are awarded a total amount of 30.000 Euro **which might be split between two equally excellent projects.** Grants are created to support good and innovative scientific, translational or clinical research in Europe.

The guidelines of **ECCO Grants** are very similar to those of the Fellowships, with the exception that the research is typically undertaken in the own institution of the applicant. ECCO Grants are awarded 15.000 Euro each and will also be given during the ECCO annual congress.

Travel Awards were established in 2007 as an opportunity for young investigators to visit different ECCO centres in Europe, to learn scientific techniques or be a clinical observer. The duration of the award is short term, maximum 3 months. SciCom needs to be informed about the duration of the stay. Although no specific project is necessary, an Award is more likely if there is a defined goal.

Detailed information, eligibility and submission process on Fellowship, Grants and Travel Awards can be found under: www.ecco-ibd.eu.

CALL FOR ECCO FELLOWSHIPS, GRANTS AND TRAVEL AWARDS APPLICATIONS

Deadline for ECCO FELLOWSHIPS, GRANTS and TRAVEL AWARDS: October 1, 2010

ECCO has established Fellowships, Grants and Travel Awards to encourage young physicians in their career and to promote innovative scientific research in IBD in Europe.

Fellowships are created for young individuals younger than 40 years, who submit an original research project, which they wish to undertake abroad in a European hosting laboratory and/or department who has accepted to host and guide the fellow for the duration of the fellowship (one year) and who is responsible together with the fellow for the successful completion of the project. Fellowships are awarded a total amount of € 30,000.

Grants are created to support good and innovative scientific, translational or clinical research in Europe. The guidelines of ECCO Grants are very similar to those of the Fellowships, with the exception that the research is typically undertaken in the own institution of the applicant. ECCO Grants are awarded € 15,000 each and will also be given during the ECCO annual congress.

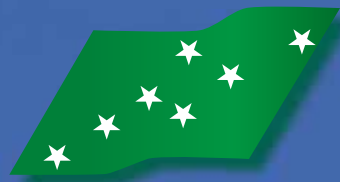
The **Travel Awards** have been established in 2007 as an opportunity for young investigators to visit different ECCO centres in Europe, to learn scientific techniques or be a clinical observer.

For detailed information, eligibility and submission process on fellowships and grants please visit the ECCO Website www.ecco-ibd.eu.

We look forward to your application!

Kind regards,

Matthieu Allez
Chair, ECCO Scientific Committee



UEGW

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Inflammatory Bowel Diseases 2011

Congress of the European Crohn's and Colitis Organization (ECCO)

Dublin, Ireland February 24–26, 2011

Preliminary Scientific Programme

ECCO'11 Dublin Congress – Preliminary Scientific Programme

Prepare for Dublin! The scientific programme is outlined below. Sessions will have a similar format, starting with the science that underpins the topic, then onto clinically relevant subjects and finally a session on clinical management, with an eye to current practice and the future. Speakers for the third talk are being asked to make it case-based, to bring the clinical relevance home. There is also a session on challenging patients and another on mimics of IBD, which will represent the daily dilemmas and pitfalls that we face in clinical practice. In addition there will be an entire session dedicated to the second pathogenesis workshop on mucosal healing. In Dublin there are more oral presentations of best abstracts than ever before (a total of 20). The Organising Committee has decided to keep the duration of abstract presentations to 10 minutes each, just as at DDW, rather than extend the time and reduce the number of presentations. Speakers will be required to restrict the presentation to just 7 minutes, which will mean pithy presentations with a vigorous 3 minutes for discussion.

We still think that combining abstracts with lectures is a good way of keeping the sessions a topical. The programme is different and diverse: Dublin will be a great event, so put the dates in the diary now (February 24–26, 2011) and keep a watch out for registration online. (More information online at <http://ecco11.ecco-ibd.eu>)

Silvio Danese
SciCom

THURSDAY, FEBRUARY 24, 2011

11:30 – 12:30 Satellite symposium

12:45 – 13:00 Opening and Welcome
Daan W. Hommes, Leiden, Netherlands
Colm O'Morain, Dublin, Ireland

13:00 – 14:40 Scientific session 1: Microbiome meets the epithelium

Jean-Frédéric Colombel, Lille, France
Laurence Egan, Galway, Ireland

13:00 – 13:20 Concept and importance of mucosa-associated bacteria
Arlette Darfeuille-Michaud, Clermont-Ferrant, France

13:20 – 13:30 Oral presentation 1

13:30 – 13:50 Metabolic functions as sensor for the microbiome
Dirk Haller, Munich, Germany

13:50 – 14:00 Oral presentation 2

14:00 – 14:10 Stressed out!
Arthur Kaser, Innsbruck, Austria

14:10 – 14:20 Oral presentation 3

14:20 – 14:40 Microbial manipulation for IBD in practice
Eamonn Quigley, Cork, Ireland

14:40 – 15:10 Coffee break

15:10 – 16:40 Scientific session 2: Mucosal healing: 2nd ECCO pathogenesis workshop

Florian Rieder, Ohio, Cleveland
Gigi Veereman, Antwerp, Belgium

15:10 – 15:20 Overview
Andreas Sturm, Berlin, Germany

15:20 – 15:35 Mechanisms of intestinal healing
Miquel Sans, Barcelona, Spain

15:35 – 15:50 Measures and markers for monitoring intestinal healing
Marco Daperno, Torino, Italy

15:50 – 16:05 Impact of intestinal healing on the course of IBD
Laurent Peyrin-Biroulet, Vandœuvre Les Nancy, France

16:05 – 16:20 Therapeutic strategies to enhance intestinal healing
Geert D'Haens, Bonheiden, Belgium

16:20 – 16:30 Oral presentation 4

16:30 – 16:40 Oral presentation 5

16:40 – 17:00 **Mini-session 2a: ECCO Guidelines 1:
The ECCO consensus process and future prospects**
Gert van Assche, Leuven, Belgium

17:15 – 18:15 Satellite symposium

FRIDAY, FEBRUARY 25, 2011

07:15 – 08:15 Satellite symposium

08:30 – 10:00 **Scientific session 3:
The age of innocence: IBD in children**
Sanja Kolacek, Zagreb, Croatia
Tom Øresland, Lorenskog, Norway

08:30 – 08:50 IBD in the very young – insights into pathogenesis
Frank Ruemmele, Paris, France

08:50 – 09:00 Oral presentation 6

09:00 – 09:20 IBD surgery in children: indications and outcome
Paolo Lionetti, Florence, Italy

09:20 – 09:30 Oral presentation 7

09:30 – 09:40 Oral presentation 8

09:40 – 10:00 Management of IBD in adolescence
Robert Heuschkel, Cambridge, United Kingdom

Inflammatory Bowel Diseases 2011

Congress of the European Crohn's and Colitis Organization (ECCO)

Dublin, Ireland February 24–26, 2011

Preliminary Scientific Programme

10:00 – 10:20	Mini-session 3a: ECCO Guidelines 2: Paediatric acute severe colitis <i>Dan Turner, Jerusalem, Israel</i>	16:40 – 17:00	Tailoring anti-TNF therapy in CD <i>t.b.a.</i>
10:20 – 10:50	Coffee break	17:00 – 17:20	Mini-session 3a: ECCO Guidelines 3: Guidelines on imaging in IBD <i>t.b.a.</i>
10:50 – 12:20	Scientific session 4: Targets in IBD: Lost and found <i>Silvio Danese, Rozzano, Italy</i> <i>Charlie Lees, Edinburgh, United Kingdom</i>	17:35 – 18:35	Satellite symposium
10:50 – 11:10	TLRs as therapeutic targets <i>Luke O'Neill, Dublin, Ireland</i>	19:00	ECCO Interaction: Hearts and minds
11:10 – 11:20	Oral presentation 9	SATURDAY, FEBRUARY 26, 2011	
11:20 – 11:40	Past and future of T cell-directed therapies <i>Yehuda Chowers, Haifa, Israel</i>	07:15 – 08:15	Satellite symposium
11:40 – 11:50	Oral presentation 10	08:30–10:00	Scientific session 7: Challenging cases <i>Willem Bemelman, Amsterdam, Netherlands</i> <i>Eugene Domenech, Badalona, Spain</i> <i>Michael Kamm, Melbourne, Australia</i> <i>Siew Ng, Hong Kong, China</i> <i>t.b.a.</i>
11:50 – 12:00	Oral presentation 11	10:00 – 10:30	Coffee break
12:00 – 12:20	Therapeutic implications of autophagy and apoptosis <i>Stefan Schreiber, Kiel, Germany</i>	10:30 – 12:00	Scientific session 8: Cancer and IBD <i>Gijs van den Brink, Abcoude, Netherlands</i> <i>Dino Tarabar, Belgrade, Serbia</i>
12:20 – 13:15	Lunch and guided poster session	10:30 – 10:50	Inflammation and cancer: Partners in crime <i>Florian Greten, Munich, Germany</i>
13:15 – 13:30	Poster award ceremony	10:50 – 11:00	Oral presentation 18
13:30 – 15:00	Scientific session 5: Optimising surgical outcomes in IBD <i>Johan Söderholm, Linköping, Sweden</i> <i>Ronan O'Connell, Dublin, Ireland</i>	11:00 – 11:20	Needle in a haystack: Strategies to detect cancer <i>Ralf Kiesslich, Mainz, Germany</i>
13:30 – 13:45	Nutrition and medication: Preparation for surgery <i>John Hyland, Dublin, Ireland</i>	11:20 – 11:30	Oral presentation 19
13:45 – 13:55	Oral presentation 12	11:30 – 11:40	Oral presentation 20
13:55 – 14:25	Treating ileocaecal Crohn's disease: Resect or medicate? (Tandem talk) <i>Julian Panes, Barcelona, Spain</i> <i>André D'Hoore, Leuven, Belgium</i>	11:40 – 12:00	Extraintestinal cancer in IBD <i>Corey Siegel, Dartmouth, United States</i>
14:25 – 14:35	Oral presentation 13	12:00 – 13:00	Scientific session 9: Marc Lémann lecture: ECCO Fellowships 2010 <i>Daan W. Hommes, Leiden, Netherlands</i> <i>Simon Travis, Oxford, United Kingdom</i>
14:35 – 14:45	Oral presentation 14	12:00 – 12:10	Presentation 1
14:45 – 15:00	Improving outcomes of pouch surgery: Raising the bar <i>Nick Carr, Swansea, Wales, United Kingdom</i>	12:10 – 12:20	Presentation 2
15:00 – 15:30	Coffee break	12:20 – 12:30	Announcement of ECCO fellowships and grants 2011 <i>Matthieu Allez, Paris, France</i>
15:30 – 17:00	Scientific session 6: Daily challenges in IBD <i>Hülya Över Hamazaoglu, Istanbul, Turkey</i> <i>Harald Peeters, Gent, Belgium</i>	12:30 – 13:00	Timing of conventional and biological therapy in the management of IBD <i>t.b.a.</i>
15:30 – 15:50	Report of the ECCO consensus on reproduction and IBD <i>Janneke van der Woude, Rotterdam, Netherlands</i>	13:00 – 13:10	Closing remarks <i>Daan W. Hommes, Leiden, Netherlands</i>
15:50 – 16:00	Oral presentation 15		
16:00 – 16:20	Optimising conventional therapies for IBD <i>Peter Irving, London, United Kingdom</i>		
16:20 – 16:30	Oral presentation 16		
16:30 – 16:40	Oral presentation 17		

Advertisement

Daan Hommes

with a new structure for ECCO on the agenda

At the ECCO Congress in Prague 2010, Professor Daniël Willem (Daan) Hommes became President of ECCO.

Daan is Chair of the Department of Gastroenterology and Hepatology at Leiden University Medical Center (LUMC) – the University Hospital in Leiden, a short distance south of Amsterdam, The Netherlands.

Began in Belgium

In his younger days, Daan had his future plans laid out in a different direction.

– I was, and still am, very interested in sports, and I spent a lot of time rowing. My ambition was to be a part of the Dutch Olympic rowing team, he reveals.

This interest caused him to skip classes sometimes, which of course had a negative impact on his study results.

– I practiced rowing a lot. I was struggling to go from a national to an international level, but I failed, he says matter-of-factly.

Today, cycling and running remain his passion, still finishing under 4 hours in recent marathons.

He also failed at first to be accepted to medical education in the Netherlands. After being rejected, Daan applied in Belgium instead – and was accepted. Therefore he spent his first two years studying medicine in the city of Gent in Belgium. The third year he was accepted in Amsterdam, he completed his studies at the Amsterdam Medical Center (AMC).

Inspiration in Canada

Daan says that towards the end of his studies he went to a lecture that he found very inspirational. The lecturer afterwards advised him to go to McMaster University in Canada.

– I followed this advice, and spent a summer with David Sackett and his group learning about Clinical Epidemiology and Biostatistics. My interest for medicine caught on there – it really opened up the medical world to me, he recalls.

But naturally there had been some interest *before* the trip to Canada. Daan ex-



Daan at he Lab in LUMC with Caterina Strisciuglio, from Italy, who is doing her ECCO Fellowship in Leiden.

plains that his father is a veterinary – and so is Daan's brother.

– So I just wanted a bigger animal, he says jokingly.

At first Daan was initially interested in thrombosis and haemostasis.

– When Sander van Deventer returned from the US during my clinical training, he asked me if I would like to help him start up a GI-lab in the AMC. That got me hooked on the subject.

In addition to experimental colitis work, Daan was involved in pioneering the first infliximab studies (named cA2 at that time). He finished his PhD on IBD in 1995, his specialization for internist in 2001.

In 2003 Daan subsequently completed his training as a Gastroenterologist.

A year before that – in 2002 – Daan became Head of the IBD Center at AMC in Amsterdam.

– I stayed there for four years. Then in 2006 I was invited to come to Leiden and head the Department of Gastroenterology and Hepatology, he continues.

Biobank initiative

In 2007 Daan became full Professor in Gastroenterology. It's a remarkably fast career. One very important factor in this

career, according to Daan himself, is his involvement and initiatives for innovating academic healthcare infrastructures.

– Current possibilities in Computer Information Technologies are completely disconnected from how we work in daily clinical practice. This is not very likely to change – if we don't act! There are unique opportunities to introduce principles of 'Business Intelligence' in our hospitals and practices, he underlines.

On a national level, Daan launched the Dutch National Biobank initiative (The Pearlstring Initiative) using IBD as a showcase (www.string-of-pearls.org), and on an international level the CuraRata Initiative (www.curarata.com). Both deal with knowledge-based acceleration of individualized medicine, allowing the use of detailed molecular datasets and decision support for individual IBD care pathways.

Chair of SciCom

Already in his inaugural speech, Daan made it clear that he would try to offer ECCO similar tools for creating a European Knowledge Network for IBD within ECCO.

He has now launched the *ECCO Biobank Initiative*, which he has asked Yehuda Chowers to chair. ➡



– Effective and efficient translation can be achieved by integrating clinical information with molecular data extracted from biobanks. Anonymized data from individual hospital’s IBD data warehouses can then be combined to study huge cohorts. Ultimately this will turn data into information, and information into knowledge and decision support.

– We will try to involve as many of our ECCO colleagues as possible. It’s a complex, but pivotal, mission – so we must try it.

Another important step in Daan’s career was of course the position he was appointed to in 2003: He then became Chair of ECCO’s Scientific Committee – SciCom. A task he looks back on with great affection.

– It was a very stimulating, co-operative and friendly atmosphere in SciCom, and we all learned a lot, he says.

One proof of this is the fact that a search on Daan as author in Medline results in no less than 140 publications!

Team-builder

Daan’s Department in Leiden employs 65 persons, including eight Gastroenterologists and Hepatologists.

– We also have seven GI-fellows at present, and we are one of in total three liver-transplant units in the Netherlands. Our focus area is IBD, liver diseases and colorectal cancer, Daan explains.

They offer scientific education & training and perform research programs attached to their focus area.

Daan himself is still pretty active in the clinic.

– I have two outpatient clinics, I perform endoscopy and I am on duty just like any of my other doctors.

He estimates that he spends approximately 30% of his time clinically. It’s quite a lot, considering the fact that he has many other tasks.

– I manage this because of the team that surrounds me – I’m carried on the broad shoulders of my team, Daan explains and adds:

– Team building is an important factor of my success!

The four drivers for healthcare

It was at the ECCO Congress in Lyon 2008 that Daan was elected President-elect.

In his inaugural speech he pointed to the fact that healthcare by tradition has been symptom-oriented. But for the fu-

ture Daan believes in a prevention-oriented approach, personalizing medicine and accelerating control of disease. This is equivalent to our perception of *cure*.

IBD is possibly one of the few chronic diseases where this opportunity exists today, according to Daan.

– We will be able to witness historic healthcare innovations through synergistic collaborations within medical societies such as ECCO, he said in Lyon.

The four main drivers for healthcare are service, quality, innovation and affordability.

– We should realize that the number of relevant stakeholders within each of these four domains is rapidly changing, he added.

“ It is time to take ECCO into the next decade – prepared and ready for the challenges that lie ahead!

Strengthen the position of the national representatives

Therefore Daan has started a process for restructuring ECCO.

– The most important is to give ECCO the infrastructure it needs for the next five to ten years, he says today.

– The key thing in my presidency is to live up to our mission and protect ECCO from today’s potential threats. They include the increased strict regulation of academia – industry relations. Therefore we need to work on our corporate identity, and our marketing communication strategies.

One other task for Daan is to personally get in touch with the National Representatives. This is called the “*Road Show*”. He describes it as a face-to-face meeting with all of ECCO’s National Representatives to understand their national IBD networks, their respective needs and relationship with ECCO and to enquire of willingness to participate in the ECCO Biobank Initiative.

– They are the ambassadors of ECCO; therefore I am going to dedicate a lot of effort and time into strengthening their position!

Amendment of the current ECCO structure

– I have proposed an amendment of our current structure to the Governing Board in order to create a more flexible ECCO with a clear distinction between governance and operations. The key message is that we will organize all of our operational activities in a new ECCO organ “*The Operational Board*”. This Board is a merger between SciCom and EduCom, which enables synergy between *all* of our experts. In addition, we invite new stakeholders to this Board: surgeons in the S-ECCO and pediatricians in the P-ECCO.

The changes also mean that an *Extraordinary General Assembly* will be held at this year’s UEGW in Barcelona. Daan explains this extraordinary event with the fact that it can’t wait for the next Assembly that is taking place at the ECCO Congress in Dublin 2011.

(Read more of this in the Editorial in this issue. The new structure will be presented at length in ECCO News 4/2010, Editors comment).

ECCO’s 10th Anniversary!

Back in Lyon 2008, Daan asked the question: What is it that creates the magical spirit in ECCO – that has attracted and inspired so many IBD colleagues in the field, be it medical specialists, nurses or professionals in patient organisations and biomedical industry?

– In my personal opinion the answer is that our young society is based on friendship and mutual respect! ECCO will continue its successful march – if it adheres her mission to the basic principles of respect, integrity, expertise and commitment, he said.

ECCO was founded in 2001, which means it will celebrate its 10th anniversary in 2011.

– Enthusiastic friends that shared a common interest – IBD – created this society. It has since grown at an unparalleled speed into something important and big. It is time to take it into the next decade – prepared and ready for the challenges that lie ahead!

And this is exactly what President Daan Hommes intends to do.

PER LUNDBLAD
Senior Writer

Characteristics & complications associated with Head of Scientific Committee: a systematic follow-up study

Introduction

The consequences of responsibility for major scientific tasks are not well understood. We hereby describe a case of a 43 year old male, followed up for 3 consecutive years since appointment as Head of SciCom

Pia Munkholm
Yehuda Chowers
Simon Travis
Walter Reinisch
S everine Vermeire

ECCO SciCom
2004-2007

Case Description



A 43 year old sportive male, 1.97m. tall, 89 kilos (MBI 23kgm²), with diversional interests in biking, skiing and closing hotel bars after Caiprinha was the subject of his study



Statistical Analyses

Non-parametric tests were necessary as behaviour patterns were obviously not normally distributed. Results are expressed as median behaviour (range zero to ∞)

Results

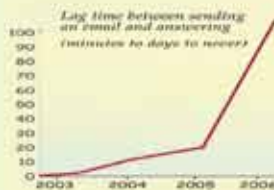
Dramatic changes in daily behaviour of our case were observed during this follow-up period:



You haven't answered my emails again Daan!!



- Whereas at the start of the observation period, our Chairman answered emails within 3 minutes, we observed a gradual increase in the interval between sending emails and response.
- There appeared to be an inverse correlation between response interval (I), topic (where E=ECCO, P=party), and Biobanking (b), with S^X as the governing coefficient. This conformed to the equation: $I \propto ((0.337E) + 2P) + S^X$
- Whereas our Chairman claimed to work 26 hours a day, he was spotted during nightly activities.



- MegaloDaan observed that it was never novel enough.
- An exponential curve delegating tasks to individual SciCom members was also observed over the period of 3 years.

Complications



During this long and meticulous period of observation, one serious adverse event was noted:

Apparent sepsis with acute onset, on October 24th in Berlin, 2006. The differential diagnosis (given that severe sepsis is not possible in a healthy sportive young man), had to include Munchhausen Syndrome, a minor cold, a major hangover, and attention deficit disorder.

A spectacular recovery occurred with restitution at integrim. The long-term effects of this serious complication can, however, not be foreseen at this juncture.

Conclusion

This is the first follow-up study of a Head of SciCom over a 3 year period.

Although it is clear from our results that SciCom Head is a tough job, not free of serious risks, the advantages on outcomes of friendship, greatly supercede the risks.

I bet Daan would never dare doing what I'm doing now...



This will impress sooo much more than a cycling outfit...



Grant support



Please let me sleep, I am so jetlagged...

This work was supported by private grants from the Travis foundation, Sevi's Charity funds, Chowers & Reinisch consultants and Munkholm corp.sp.

When he stepped down as Chair of SciCom, this poster was presented to Daan as a joke and a farewell present from the previous SciCom.

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Travel Award 2010

Travel from Dept. Gastroenterology Haifa, Israel to the Dept. Gastroenterology, Leiden, Netherland

My visit to LUMC in Leiden was an amazing learning experience. Dr. Hommes and his team walked me through the process of Biobanking in their institution, from start to finish and shared their valuable experience with me. I was presented with the ideas and vision behind the project as well as practical solutions to problems they have encountered.

I believe we can implement into our biobanking efforts in Israel most of these ideas in a manner that will fit our healthcare system but will still retain many similarities. Thus, we should be able to create a common ground and use a similar “language” for future collaborations. Hopefully such broad collaborations between centers involved in the process of Biobanking, using a similar data collection process, will play a key part in future research of IBD.

Sincerely

Dr. Itay Maza

Dept. Gastroenterology
Rambam Health Care Campus
Haifa, Israel

And the Winners are...

Free registration ECCO'11 Dublin Congress

Feedback is highly valuable for ECCO in order to continuously improve the annual congress. Hence, 3 free registrations for the 6th Congress of ECCO – ECCO'11 Dublin Congress were drawn among all submitted evaluation forms of the ECCO'10 Prague Congress.

We are happy to announce that the following delegates will receive a free registration for the ECCO'11 Dublin Congress:

Patrick Schoenaers (Belgium)

Ivo Duytsburgh (Belgium)

Gionata Fiorino (Italy)

We kindly ask the winners to contact the ECCO Office at ecco@ecco-ibd.eu regarding further steps of the congress registration!

ECCO Booth at the UEGW – Come and meet the team!

Our ECCO team will be present at the UEGW in Barcelona (23–27 October, 2010). Meet the new faces in our ECCO team and find out more about membership, ECCO research activities and workshops throughout Europe and beyond. Receive information on the JCC, guidelines and the ECCO News.

The ECCO Office Team

Nicole Eichinger

Managing Director and
Congress/Society Manager
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Competition: “Win an ECCO membership for 2011 by sharing your best ECCO memories!”

During the ECCO Congress in Dublin in 2011, ECCO will celebrate its 10th anniversary.

It has been a time shaped by the enthusiasm and support of friends and functionaries of ECCO that has led us to the society that we are today. Since you – our members, officials and representatives, our supporters and sponsors – have come along with us for the past 10 years, we would like to ask you to share your fondest ECCO memories with us. The best entries will be collected and published in an ECCO anniversary book that will be available at ECCO'11 Dublin.

You can submit either a photo or an anecdote. The best photo and the best anecdote will be awarded with a **free ECCO membership for 2011!**

Deadline for submission: **01. October 2010.**

Please submit your photo or anecdote to ecco@ecco-ibd.eu with the reference “10 Years ECCO_ YOUR NAME”

We are looking forward to receive your contributions and sharing them with the ECCO family!

Advertisement

9th IBD Intensive Advanced Course for Junior Gastroenterologists

Dublin, February 23–24, 2011
Preliminary programme

Wednesday, February 23, 2011

TIME	TITLE	
08:00 – 08:15	Welcome	
08:15 – 08:45	Pre-course test	
08:45 – 10:15	I. Lecture Session	
08:45 – 09:15	Pathogenesis and therapeutic targets in IBD	
09:15 – 09:45	The genetics of IBD	
09:45 – 10:15	Diagnostic strategies for IBD (UC and CD)	
10:15 – 10:35	Drugs for IBD: Mechanisms of action	
10:35 – 11:00	Coffee break	
11:00 – 12:00	II. Seminar Session	
11:00 – 11:30	Seminar I: IBD and pregnancy	Seminar II: Nutrition in IBD
11:45 – 12:15	Seminar I: IBD and pregnancy	Seminar II: Nutrition in IBD
12:15 – 13:15	Lunch break	
13:15 – 15:30	III. Ulcerative Colitis Session	
13:15 – 13:45	Mild to moderate ulcerative colitis	
13:45 – 14:35	Tandem Talk: Refractory and fulminant ulcerative colitis and Surgery for ulcerative colitis	
14:35 – 15:05	Cancer surveillance and chemoprevention	
15:05 – 15:35	Pouch, early and late complications	
15:30 – 16:00	Coffee break	
16:00 – 18:00	IV. YECCO Workshop	
	Separate programme!	

Thursday, February 24, 2010

TIME	TITLE	
08:00 – 09:40	V. Crohn's disease session	
08:00 – 08:25	Mild-to-moderate Crohn's disease	
08:25 – 08:50	Severe Crohn's disease	
08:50 – 09:15	Fistulizing disease	
09:15 – 09:40	Stenotic disease	
09:40 – 10:00	Coffee break	
10:00 – 11:00	VI. Seminar Session	
10:00 – 10:30	Seminar III Surgery for Crohn's disease	Seminar IV: Pediatric Crohn's disease
10:45 – 11:15	Seminar III: Surgery for Crohn's disease	Seminar IV: Pediatric Crohn's disease
11:25 – 11:55	Post-course test	
11:55 – 12:10	Closing remarks	

Call for applications for the 9th IBD-ECCO Course in Dublin

The 9th ECCO Advanced Course in IBD for residents, fellows in gastroenterology and junior faculty will take place in Dublin, Ireland from February 23–24, 2011, just prior to the next ECCO Congress.

The 31 ECCO member states will be able to nominate 2–3 students – some seats will also be available for students from overseas.

The nominated and selected of participants should be:

- Trainees at least in their third year with preferably one year GI experience;
- Demonstrating a sufficient level of English to follow the course;
- Should preferably be or become member of ECCO.

In addition each applicant will have to hand in a CV (in English, containing contact details, position and information about their hospital affiliation) and a short letter of intent (in English).

Please send all the applications directly to your ECCO National Representative (a list of the contacts can be found at the end of this issue.)

The application deadline is **October 15, 2010**.

On behalf of the Education Officer, Dr. Janneke van der Woude, nominated candidates will be informed about their application status by **November 2, 2010**.

Please contact our **ECCO Office** (eccoc@eccoc-ibd.eu) if you have any further questions.

4th Y-ECCO Workshop

The ECCO Education Committee and Young ECCO are pleased to announce the 4th Y-ECCO Workshop “How to pursue a career in IBD”.

This Workshop is going to take place on Wednesday, February 23, 2011 from 16:00 to 18:00 prior to the 6th Congress of ECCO in Dublin, Ireland.

The workshop aims to provide gastroenterology trainees, who have already developed an interest in inflammatory bowel disease, with a basis for developing a career in IBD. This year, succeeding the meeting last year in Prague, the workshop will provide building blocks for a successful career in IBD. Themes addressed are:

- * **how** to build an appropriate cohort for translational research,
- * **how** to stimulate networking between European groups and
- * **how** to make a career in IBD more attractive for females,
- * **how** to obtain funding for your research and tips,
- * and tricks and pitfalls of interacting with pharmaceutical companies will be presented.

After the workshop we will move to a nearby pub to exchange thoughts and ideas in an informal setting.

The participation in the workshop is free of charge for all Y-ECCO members. You may register for the workshop as part of the congress registration via the online congress registration system on <http://ecco11.ecco-ibd.eu>.

Preliminary programme for Y-ECCO Workshop in Dublin 2011, February 23, 2011 (16:00–18:00):

“How to pursue a career in IBD”
Welcome and introductions
How to stimulate networking between European groups and how can we all benefit from it?
How to build an IBD cohort for translational research?
How to make a career in IBD more attractive for females?
How to get funding for research?
Tips, tricks and pitfalls of interacting with pharma.
Discussion



Experience the ECCO spirit – Become a member!

Become a member or renew your ECCO membership for 2011 and profit from a reduced registration for the ECCO Congress in Dublin, February 24–26.

Becoming a member of ECCO you will experience a range of benefits, including:

- Reduced registration fee for the annual ECCO Congress for the year of membership
- Free subscription to JCC – The Journal of Crohn’s and Colitis (4 issues/year and online access)*
- Monthly e-newsletter on all ECCO activities and latest news in IBD
- Free subscription to the quarterly ECCO News – the society’s magazine
- Membership log-in to www.ecco-ibd.eu (*member search, reports of the General Assembly, etc.*)
- Free use of IBDIS (category 1)
- Special educational and networking activities for graduates, fellows, and nurses
- Access to a large network of young and inspired IBD specialists

Apply online at www.ecco-ibd.eu.

For any questions regarding ECCO or an ECCO membership please contact the ECCO Office in Vienna (Tel: +43 1710 22 42, E-mail: ecco@ecco-ibd.eu)

*For Regular members only

ECCO Nurses Network

– Upcoming educational activities

The ECCO Nurses Network (N-ECCO) is part of the Education Committee of ECCO. Each year, NECCO organises two educational activities which take place along side the main ECCO congress every year.

N-ECCO Network Meeting

The N-ECCO Network Meeting is already an established event for nurses working within the specialty of inflammatory bowel disease (IBD). It is a 1 day meeting, gathering nurses from across Europe with an interest in IBD to exchange experience and views together with invited medical doctors.

The N-ECCO Network Meeting encourages networking for Specialist Nurses in IBD and also provides nurses with education and updates on recent developments within the field.

Attendance for the 5th N-ECCO Network Meeting in Dublin in 2011 is free for all nurses who are members of ECCO. For attendees of the ECCO Congress, registration for the Network Meeting will be part of the congress registration process. For further information please contact the ECCO Office (ecco@ecco-ibd.eu).

N-ECCO School

After the big success in 2010 the N-ECCO Steering committee will pursue a relatively new educational activity for IBD Nurses at the ECCO Congress in Dublin in 2011. The N-ECCO School intends to give nurses who might still be in training and have an interest in IBD, the possibility to attend an IBD focused course. The aim of this program will ultimately be to improve nurse education throughout Europe.

Registration for the 2nd N-ECCO School in Dublin in 2011 will be via nomination by the N-ECCO/ECCO National Representatives.

For further information on N-ECCO and its activities, please visit the ECCO website at www.ecco-ibd.eu or contact the ECCO Office, ecco@ecco-ibd.eu.

Preliminary Programme for the 5th N-ECCO Network Meeting, February 24, 2011:

08:00 – 09:00	Breakfast symposium
09:15 – 09:30	Welcome and introduction
09:30 – 11:00	Session 1 – IBD Modern Day Management Issues
09:30 – 09:50	TALK 1 Vaccination. New Guidelines!
09:50 – 10:10	TALK 2 Travelling with IBD
10:10 – 10:30	TALK 3 Anaemia in IBD
10:30 – 11:00	Coffee break
11:00 – 11:30	TALK 4 Managing IA Pouch
11:30 – 12:00	TALK 5 Novel Therapies – what's new in IBD management.
12:00 – 12:30	ABSTRACT SESSION 3 x 10 minutes
12:30 – 14:00	Lunch Including poster session
14:00 – 17:00	Session 2 – Taking Control of IBD
14:00 – 14:20	TALK 6 Psychological issues
14:20 – 14:40	TALK 7 Urgency and incontinence
14:40 – 15:00	TALK 8 Nutrition
15:00 – 15:20	DISCUSSION
15:20 – 15:40	Coffee break
15:40 – 16:00	Update on N-ECCO activities
16:00 – 17:00	Supporting the patient in dealing with IBD. How we do it – A European Overview
17:15 – 18:15	Afternoon Symposium

Preliminary Programme for the 2nd N-ECCO School, February 23, 2011:

07:45 – 08:45	Breakfast Symposium
09:00 – 09:05	General introduction and opening remarks
09:05 – 09:15	Welcome and introduction
09:15 – 11:00	Session 1 – Diagnosis and Assessment
09:15 – 09:45	TALK 1 English terminology for IBD Nurses
09:45 – 10:15	TALK 2 Anatomy and physiology of the GI tract – Pathophysiology of IBD
10:15 – 11:00	TALK 3 Diagnosing IBD and assessing disease activity
11:00 – 11:30	Coffee break
11:30 – 12:00	TALK 4 Overview medical treatment
12:00 – 12:30	TALK 5 Surgery in IBD
12:30 – 15:15	Session 2 – Case Studies – Disease Management
12:30 – 13:15	Workshop 1 IBD Case 1 – UC (Group A)
13:15 – 14:30	Lunch
14:30 – 15:15	Workshop 2 IBD Case 1 – UC (Group B)
15:15 – 18:45	Session 3
15:15 – 15:45	TALK 6 Nursing roles in IBD management
15:45 – 16:15	Coffee break
16:15 – 16:45	TALK 7 Nutritional Aspects in IBD
16:45 – 17:15	TALK 8 Children with IBD
17:15 – 17:30	Closing remarks
17:45 – 18:45	Afternoon Symposium

Advertisement

Call for N-ECCO National Representatives

We are keen to get representation from all of the European countries.

If you do not see your country represented on the list below, please make contact the ECCO Office at ecco@ecco-ibd.eu for further information on the role of a N-ECCO Representative.

All N-ECCO reps should already be a member of ECCO.

N-ECCO Steering Committee 2010

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Network Meeting Officer	Jannette Gaarenstroom	The Netherlands	J.C.Gaarenstroom-Lunt@umcutrecht.nl
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Do you want a personal subscription to ECCO NEWS?

The aim of ECCO NEWS is to reach all doctors and nurses in Europe with an interest in IBD. ECCO NEWS is an important part of the European Crohn and Colitis Organisation's ambition to create a European standard of IBD care and to promote knowledge and research in the field of IBD. The newsletter is financed through advertisements and distributed free of charge. If you are yet not on the mailing list you can have a personal paper copy sent to your postal address 4 times a year. Just send an email to ecco@mediahuset.se stating your postal address. The information you give will not be used for any other purpose than distributing ECCO NEWS.

TOM ØRESLAND, Editor ECCO News

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