Climate Change and Gastrointestinal Health. Time to Educate and Advocate

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The world empathizes with the Australian people and grieves the loss of human life, flora, fauna and habitat. We are connected to our Australian colleagues not only by our shared distress but by the air which we breathe, as evidenced by the National Aeronautical and Space Administration satellites, which show smoke from the fires circumnavigating the globe.¹

Bushfires are a normal feature of the Australian climate. However, the severity of the fires and their extent so early in the season is outside the norm. Extreme climate events,² sustained high temperatures, and dry conditions are a feature of global warming. It is not unreasonable to posit a link between rising global temperature and the fires devastating parts of south eastern Australia.

One of the events of 2019 was the emergence of a global movement, inspired in part by the Swedish teen Greta Thunberg, demanding action on the climate crisis. It was 1896 when another Swede, Svante Arrhenius, published a landmark paper ³ in which he theorized that increasing CO2 concentrations in the atmosphere, as a result of industrial output, would lead to a rise in atmospheric temperature.

CO2 is one of the greenhouse gases (GHG). Its molecular structure allows it to capture solar energy which would have been reflected back from the earth into space. As energy is absorbed by CO2 it leads to an increase in atmospheric temperature. Since the start of the industrial revolution humans have put 900 billion tons of CO2 into the atmosphere.² Most of the CO2 originates from our preferred energy source, fossil fuels. The oceans have absorbed some of this, but much has remained in the air. At the start of the industrial revolution the concentration of CO2 in the atmosphere was about 280 ppmv (parts per million by volume). It has risen every year since 1958, when continu-
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ous measurements were first made, and is currently over 410 ppmv, a concentration which has not been seen in the last 800,000 years.$^4$

In 1988, in response to increasing concerns about global warming, the United Nations and the World Meteorological Association formed the Intergovernmental Panel on Climate Change (IPCC). The IPCC does not perform independent research but gathers the evidence as it emerges, brings scientists together, and issues reports which inform decision makers.

In 2005 the UK government convened a meeting which agreed that holding warming to 2°C was a reasonable target. Below 2°C it was felt that there would be winners and losers but above 2°C we all lose. There is now strong evidence that global mean temperature has risen by about 1°C compared to the preindustrial age and that this rise in temperature is related to rising levels of CO2 and other gases in the atmosphere.$^5$. The extreme events in Australia are occurring at half the temperature rise which was felt to be an acceptable target. This does not bode well for the consequences of the next 1°C rise.

Our response to this rising temperature has been tepid. We are not decreasing CO2 output but increasing it, year over year. Consequently we are on track to go beyond a global mean rise of 1.5°C by the end of the decade, or sooner.

The IPCC has reported on the effects which will be seen at a rise of 1.5°C and 2.0°C. Physicians should make themselves familiar with this since there are major health implications which will affect every nation. The report is comprehensive and dense, but the executive summary is easily read. The world is not a homogenous place in terms of current climate, socioeconomic status, infrastructure and ability to adapt. The impact of climate change varies not only by geography but by population. It is complex but the report spells out anticipated changes by region.

Why is climate change referred to as a climate crisis? The IPCC projections have limitations. Some parts of the world have limited data points, the timeline over which some measurements are available is short. The projections are, therefore, given with varying degrees of certainty. The projections have been criticized for being too optimistic thereby fueling complacency and postponing meaningful action. In addition, there are tipping points in ecological systems which may trigger catastrophic feedback loops.$^6$ The Canadian Arctic, for example, is warming at twice the global average. Biological material currently sequestered in permafrost is being released as CO2 and the even more powerful GHG, methane. This leads to a rise in temperature and even more GHG release. Permafrost emissions, even with low temperature rises, could be as much as 100 billion tons. There are many other systems whose collapse may trigger catastrophic cascades including the Arctic, Antarctic and Greenland ice sheets, the Amazon rainforest, and the Atlantic Gulf stream circulation. Humanities ability to determine the future of our climate may be taken out of our hands very quickly and without much more warning than we have already been given.

Climate change has many aspects one of which is that it is a major health issue. Gastrointestinal health is vulnerable to climate change in a number of ways. Given that developing world countries will be severely affected by climate change and that their health systems already struggle with demand, we can predict that the challenges will be most pronounced there.

Nutrition and malnutrition are core issues in gastroenterology. Food security will be affected by rising temperatures and changing precipitation. The effects will vary by geographic location and crop type. Some areas, such as those in high latitudes, may experience increased crop yields but overall as temperature rises, yields will fall. The IPCC report concluded that “increasing global temperature poses large risks to food security globally and regionally, especially in low latitude areas”.$^7$ More than 815 million people were undernourished in 2016. Many millions more will be at risk of starvation or malnutrition as temperatures rise.

Access to adequate amounts of clean water is essential to human health. Contaminated water is a potent source of infection, contributing to diarrheal illness with resultant morbidity and mortality, especially in children in developing countries. The effects of chemical contamination are less well known but are important. We do not know, for example, the ef-
Effects which run off of chemicals used, or released, in the Australian fires will have on water supplies. The IPCC estimates that 80% of the world’s population already suffers from serious threats to its water security. The IPCC also estimates that over the next decades that changes in population (growth, density, migration to cities) will have a greater effect than climate change but that climate change will exacerbate this. Based on some studies an additional 8% of the global population will experience a severe reduction in water resources at 1.7°C degrees of warming.

In 2014 the IPCC issued its fifth assessment report (AR5) and concluded that there was low confidence, due to limited evidence, that anthropogenic (human driven) climate change has affected the frequency and magnitude of floods. That report also concluded that drought frequency has changed over the last decades. It is projected that drought, especially in the Mediterranean basin and West Africa will increase.

When precipitation occurs, it is generally preferable that it occurs spaced out over time rather than in torrential downpours. Water treatment and sewage systems are designed with limited tolerance for extreme events. Evidence continues to grow but there is concern that the frequency of heavy rainfall events will increase in many areas. Reports of outbreaks of gastrointestinal illness associated with high effluvial events are appearing from both developed and developing countries.

Infrastructure is critical to the delivery of gastrointestinal care in many countries. Gastroenterology procedures require buildings, electricity, and clean water. Severe storms can destroy infrastructure and cause health care disruption. Hurricane Katrina impacted one of the wealthiest countries in the world with virtual collapse of care in a major urban center. Surprisingly the evidence linking global warming to the frequency of tropical cyclones (hurricanes and typhoons) is not convincing. With regard to storm intensity however, most studies report an increase in the occurrence of very severe storms in particular for the North Atlantic, North Indian and South Indian ocean basins. These intense storms are hugely destructive and can cripple health care systems, bringing the practice of diagnostic and therapeutic gastroenterology to a halt.

The oceans cover over 70% of the earth’s surface and have thus far limited the rise in atmospheric temperature and CO2 levels. The oceans are now at the warmest ever recorded in human history. Warm water expands and this combined with increased ice cap runoff has led to a rise in ocean level. Changing water temperature contributes to ecosystem loss, migration of fish with resultant loss of aquatic food sources and bleaching of reefs. Changing water level will physically threaten low lying islands such as those of the South Pacific, lead to a loss of coastal arable land, and contamination of groundwater.

As temperature rise alters habitats, there will be changes in the distribution of some GI diseases. For example, the Baltic Sea is an increasingly fertile ground for the emergence of cholera. The Vibrio organism thrives in warm water of reduced salinity. Warming temperatures in the Baltic combined with increased freshwater runoff are combining to produce favorable conditions.

Solutions to the crisis are possible but complex. They involve reducing GHG emissions, removing GHG from the atmosphere and mitigating the damage which is already underway. How can we persuade the developed world to reduce its emissions? How can developing world nations, which have not proportionately contributed to the crisis, be asked to restrict growth in the face of their citizens ongoing poverty and deprivation? Developing world countries can, quite rightly, point out that they are not responsible for the current load of GHG and they may not accept restrictions on growth. Developed nations may not be willing to accept a reduction in their standard of living.

As physicians our input on these issues will be limited, but important. We can do what we do well – educate and advocate. We can change our own...
behavior 16, and urge our peer organizations to form climate action groups. We as WGO can educate ourselves and others, we can speak as advocates for our populations and lobby our political leaders to move from alarm to action. We can contribute to the research gaps in the area of health and climate.

It is late in this crisis, but it may not yet be too late. Silence on this issue from the Gastroenterology community is no longer a reasonable stance.

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Gastroenterology Practice in COVID-19 Epidemic

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The pandemic of coronavirus disease 2019 (COVID-19), caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), first reported in China in mid-December 2019, now affects the whole world. As of March 23, 2020, more than 332,930 laboratory-confirmed cases globally and more than 14,510 deaths in over 100 countries had been reported. Global research work on COVID-19 ranges from finding out where the virus came from, the modes of transmission, quick diagnosis and the treatment.

COVID-19 is mainly manifested as pneumonia and can also cause digestive symptoms such as poor appetite, nausea, vomiting, diarrhea, abnormal liver enzymes, or exacerbation of symptoms or disease activity for pre-existing digestive diseases such as inflammatory bowel disease (IBD). Loss of smell following a viral infection is the second most common cause of smell loss, probably accounting for about 12% of all cases, ENT surgeons across the globe have shared reports that they have seen patients reporting anosmia suggesting Die Übersichtarbeit fasst die aktuellen Erkenntnisse der Auswirkung der COVID-19 Pandemie für die Arbeit der HNO-Ärztin und des HNO-Arztes zusammen. Die aktuell diskutierte Rolle einer Anosmie oder Hyposmie als COVID-19 assoziiertes Symptom wird dargestellt. Wir diskutieren das klinische Management aller HNO-Fälle, aber insbesondere von COV-19 erkrankten Patienten aus Sicht der HNO-Heilkunde. Ein besonderes Augenmerk gilt den Auswirkungen auf die HNO-Untersuchung und auf HNO-ärztliche Operationen.

the role of anosmia and hyposmia as a potential COVID-19 related symptom is presented. About 40% of anosmia cases occur after the infection, according to a statement published online on March 21 by ENT UK6,7. As the SARS-CoV-2 can be isolated in feces by culture and rtRT-PCR, attention should be paid to feces contaminated environment that may lead to contact or aerosol transmission and the protection from the fecal contamination should be provided to medical staff treating the suspected COVID patients with GI problems.

During the epidemic in China, patients admitted to emergency, general, and digestive specialist clinics are obligated to check for suspected COVID-19 by reporting exposure history, taking body temperature, doing NP swab for PCR and chest CT to control cross-infection. Medical staff should have corresponding knowledge, improve the triage and consultation process, and pay attention to the screening of potential COVID-19 patients. Physicians should implement the first diagnosis responsibility system to achieve early diagnosis, early isolation, and standardized management. Any patients coming to hospital with fever will be screened by isolated fever clinic. Suspected and confirmed cases, no matter if they have GI diseases, should be isolated and treated at designated hospitals with effective

Clinical Practice in Gastroenterology in COVID 19 Epidemic

Patients with COVID-19 may complain of digestive symptoms such as poor appetite, nausea, vomiting, diarrhea, abnormal liver enzymes, or exacerbation of symptoms or disease activity for pre-existing digestive diseases such as inflammatory bowel disease (IBD). Loss of smell following a viral infection is the second most common cause of smell loss, probably accounting for about 12% of all cases, ENT surgeons across the globe have shared reports that they have seen patients reporting anosmia suggesting Die Übersichtarbeit fasst die aktuellen Erkenntnisse der Auswirkung der COVID-19 Pandemie für die Arbeit der HNO-Ärztin und des HNO-Ärztes zusammen. Die aktuell diskutierte Rolle einer Anosmie oder Hyposmie als COVID-19 assoziiertes Symptom wird dargestellt. Wir diskutieren das klinische Management aller HNO-Fälle, aber insbesondere von COV-19 erkrankten Patienten aus Sicht der HNO-Heilkunde. Ein besonderes Augenmerk gilt den Auswirkungen auf die HNO-Untersuchung und auf HNO-ärztliche Operationen.
isolation, protection and prevention conditions in place. A suspect case should be treated in isolation in a single room. Confirmed cases can be treated in the same room. Take Wuhan, the hardest-hit city in central China’s Hubei Province as example, there are 14 temporary hospitals transformed from the city’s venues, were the key to prevent the spread of the virus. They housed over 13,000 beds exclusively for patients with mild symptoms and provided timely treatment. Wuhan's best tertiary exclusively for patients with mild symptoms and provided timely treatment. Wuhan's best tertiary hospitals were designated to treat critical patients. There is a consensus hospitals were designated to treat critical patients. There is a consensus published by the Chinese Society of Gastroenterology under the Chinese Medical Association for gastroenterologists in China guiding some major issues in digestive system related to COVID-19.

To reduce the clinical visits, most of the health providers in China opened the online consultation for the patients who need professional advice and the follow up consultation of chronic disease management nationwide. The online consultations are free to patients to encourage the patients accept new model of clinical service.

Main clinical manifestations of COVID-19 in digestive system
The impact of COVID-19 on digestive system results in a variety of symptoms and changes, more common in middle-aged and elderly people. The most common clinical manifestations are fever (88.7%) and cough (67.8%). The digestive system manifestations include loss of appetite (39.9% to 50.2%), diarrhea (2.0% to 49.5%), nausea (1.0% to 29.4%), vomiting (3.6% to 15.9%), abdominal pain (2.2% to 6.0%) and gastrointestinal bleeding (4.0%) which may occur in severe cases. On admission, 39.1% of patients had liver enzyme abnormalities of varying degrees, and 39.9% showed elevated lactate dehydrogenase. Although published literature and data from various centers differ, GI symptoms and manifestations are a clinical component of COVID-19.

The pathogenesis of COVID-19 related damages is unknown to the digestive system. Limited autopsy and puncture pathology report damage in the esophagus, stomach, intestine, and liver. In addition to hypoxia caused by pneumonia, inflammation of the systemic system, and adverse drug reactions, direct viral binding and entering to human cells through angiotensin converting enzyme (ACE2) may induce the damage. ACE2 is expressed in respiratory organs, esophagus, small intestine and the colon as well. Whether SARS-CoV-2 directly affects target organs of the digestive tract through ACE2 and causes corresponding symptoms needs further study.

COVID-19 related diarrhea
COVID-19 related diarrhea most often occurred 1 to 8 days after the onset, with a median time of 3.3 days. Some patients had diarrhea as the first symptom, and the diarrhea lasted for 1-14 days with 34.3% of diarrhea appearing watery. There were 6.9% of patients who showed abnormal stool test, and 5.2% were positive for white blood cells in the stool microscopically. When COVID-19-related diarrhea is diagnosed or suspected, it should always be distinguished from drug-induced diarrhea and other comorbidities as many of the antiviral agents such as arbidol, chloroquine phosphate, lopinavir and ribavirin even including traditional Chinese medicine may cause adverse reactions like diarrhea.

Nutrition support in the COVID-19 treatment
About 80% of patients with COVID-19 are mild without eating problem. For patients with severe COVID-19 with gastrointestinal symptoms, nutritional assessment can be performed. If the patient has gastrointestinal lesions and cannot tolerate enteral nutrition, parenteral nutrition can be added to maintain a normal energy supply. Once the risks affecting enteral nutrition are removed, enteral nutrition should be restored as soon as possible, and oral eating should be encouraged.

For those who cannot orally intake (such as receiving mechanical ventilation), the nasogastric tube for enteral nutrition is necessary. If the patient is at high risk of aspiration or cannot tolerate nasogastric tube feeding, a nasojejunal tube can be placed for feeding. If parenteral nutrition is used before the patient’s enteral nutrition is implemented, the initial treatment of enteral nutrition should be based on low energy, small doses, multiple feedings, and gradually transition to full energy to reduce gastrointestinal reactions or intolerance.

Liver injury
The incidence of liver injury in COVID-19 can reach 39.1% to 43.4%. Lab tests on admission day showed 39.1% of patients had slight increase in alanine aminotransferase (ALT), aspartate transaminase (AST), or bilirubin. In addition, the proportion of patients with abnormal liver function was significantly higher in critical cases than that of non-critical ones (67.4% vs. 34.1%). The liver damage of COVID-19 may be due to transient hepatocyte damage of this coronavirus. Whether or not SARS-CoV-2 impairs the liver and bile duct cells expressing ACE2 is not clear. Antiviral therapy drugs been tried to treat COVID-19 such as lopinavir, ritonavir, ribavirin, or traditional Chinese medicine may cause drug-induced liver injury. So do the antipyretic and analgesics used for antipyretics, combined with antibiotics used for bacterial infections such as quinolone, cephalosporins. Other rea-
sons for hepatic impairment may exist during COVID-19 such as dyspnea resulted in chronic hypoxia. Most of the COVID-19-related liver injuries are in mild degree (not more than two times above the normal value), and only need close watch without intervention.

There is only one case reported a patient with hepatocellular carcinoma (HCC) who underwent liver transplantation and experienced COVID-19 infection during the perioperative period.16 While recipients of liver transplants need to be under the treatment of immune suppressants, which makes the patients higher susceptibility to SARS-CoV-2 infection. Moreover, the mortality of liver-transplanted recipient with COVID may be significantly higher than that of the general population (no data supported yet).

**IBD in COVID-19 epidemic**

All population is generally susceptible to SARS-CoV-2. There is no data reported the incidence of SARS-CoV-2 infection in IBD patients but patients with inflammatory bowel disease (IBD), in particular those on immune suppressive agents or biologics might be immune-compromised, should follow all relevant guidelines to minimize exposure to COVID-19. There are 40 cases of COVID-19 in IBD patients reported globally according to the updated data in SECURE-IBD Registry on March 23, 2020 including two deaths. Overall outcome so far appear similar to general epidemiology of COVID19. During the active phase of IBD, patients may show symptoms such as fever and diarrhea, and may also overlap with the symptoms of SARS-CoV-2 infection. Therefore, it is particularly important for patients with IBD to be well informed with knowledge of COVID-19 and self-management during the epidemic besides the basic precautions for protection18.

The Chinese IBD Committee, branch of the Chinese Society of Gastroenterology has published a consensus about the management of patients with IBD during the epidemic of COVID-19 in early February, with recommendations including the susceptibility of IBD patients to SARS-CoV-2 infection, management strategy for patients with active IBD and in remission, safety of the medication and endoscopy, deal with IBD patients infected with SARS-CoV-2 or attacked by COVID-19. Some academic organizations such as ECCO and CCF also published the related recommendations19,20. For IBD patients on steroids, immunosuppressants and/or biologics, it is strongly recommended that unnecessary travel and mass gatherings should be avoided. Physicians or nurses should also consider the access of health care for IBD patients during the special epidemic prevention period and provide adequate patient education through different platforms such as telephone, online consultation, social media with either the knowledge of IBD or the prevention of COVID-19.

**Digestive endoscopy service in COVID-19 Epidemic**

Digestive endoscopy will directly contact with the mucosal secretion or luminal discharge, and will irritate the throat, which can cause choking, coughing, gagging and vomiting. High-pressure will induce the aerosol formation and spraying to the environment. Some procedures requiring general anesthesia or even tracheal intubation will be in even higher risk21. In the COVID-19 epidemic area, it is recommended to suspend elective procedures. Emergency endoscopic procedures should be retained. Indications for emergency endoscope include diagnosis and treatment of acute gastrointestinal bleeding, removal of foreign bodies in the digestive tract, obstructive cholangitis, and endoscopic treatment of biliary pancreatitis.

The endoscopic center of the epidemic area is conditionally arranged according to the clean area, buffer zone, and polluted area, and the staff flow should be separated from the patient flow. Prior to any procedure, COVID-19 screening is performed first, including body temperature, blood routine, lung CT, nasopharyngeal swab nucleic acid test, SARS-CoV-2 specific antibody test, etc. If the initial screening is negative, the medical staff should wear surgical masks or medical protective masks, disposable hats, gowns and shoe covers, goggles and / or protective face shields, and rubber gloves according to the secondary protection standards. If COVID-19 is diagnosed or suspected, patients should be arranged for diagnosis and treatment in an isolated endoscopic operating room, if possible, in a negative pressure procedure room. Medical staff should add a comprehensive respiratory protective device (if no, 360° mask is required to protect the head and neck), double rubber gloves, etc. Patients who are unable to be screened for COVID-19 due to emergency are treated as suspected cases. After the diagnosis and treatment, the inspection equipment and operating room are disinfected according to standards.

For the patients with indications for endoscopic diagnosis, other options include capsule endoscopes or disposable endoscopes which do not need to be cleaned and disinfected.

COVID-19 is a new infectious disease, and its global understanding is continuously deepening and evolving. According to a survey of 2,209 GI physicians nationwide in China, the rate of awareness or correct knowledge of COVID-19 induced damage in the digestive system is about 31% - 35%, suggesting insufficiency of the relevant knowledge and dynamic progress of COVID-19 in physicians22.

There are currently no proven...
therapies or vaccines for COVID-19, but dozens of potential options are under clinical trial and more than 30 vaccines have been developed and are in the pre-clinical trial stage and two in clinical trial. The intense communication and information sharing has led to research actions faster than ever before during the outbreak. As the epidemic spreads around the globe, only the international cooperation, investing in health, and engaging communities are keys to effectively tackle the pandemic to fight COVID-19.

We are grateful to President Naima Amrani of the World Gastroenterology Organisation for writing the letter in February to encourage the Chinese Society of Gastroenterology working on the frontline of combating COVID-19.

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Message from the Editors

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Here you have another excellent e-WGN issue, thanks to our many wonderful contributors worldwide, ready for your reading in quarantine times. The two main articles talk about present-day and worrisome problems: global warming and, of course, the current and frightening COVID-19 pandemic. Professors Desmond Leddin, from Canada, and Finlay Macrae, from Australia, have done a beautiful review on climate change around the world and invite us to think about climate and health, and, from China, comes an extensive and unmissable review on COVID-19 and its consequences both on the gastrointestinal system and liver and on the management of GI/liver diseases. This article, written by Profs. Lu Xia, from Shanghai, and Kaichun Wu, from Xi’an, was published online earlier on the WGO website and has already reached thousands of hits.

Additionally, e-WGN presents his tribute to the Professor Meinhard Classen, former WGO president, who passed away last October. Also, e-WGN highlights some initiatives from India, Philippines, Hong Kong, Nigeria and present international delegates’ perspectives on GI 2019 South African congresses.

Last, but not least, e-WGN presents the 2020 World Digestive Health Day. Gut microbiome is the very special theme this year. Professors Eammon Quigley, from USA, and Uday Goshal, from India, are the co-chairs of this important world campaign.

We hope you enjoy reading this issue. Keep well and safe.

Anita and Mario.
Gastro 2020 Prague: Registration and abstract submission is open!

World Gastroenterology Organisation (WGO) is pleased to co-host its biyearly international conference, Gastro 2020, with the Czech Society of Gastroenterology (CSG), in Prague, Czech Republic.


This event is also co-organized jointly by the Czech Society of Hepatology, Czech Society of Gastrointestinal Oncology, and Czech Society of Surgery.

WGO and the CSG are pleased to present the Joint Steering Committee and Joint Scientific Program Committee:

**WGO Joint Steering Committee**
- Naima Amrani, President
- Cihan Yurdaydin, Past President
- Guilherme Macedo, President-elect

**CSG Steering Committee**
- Julius Spicak, CSG Board Representative
- Ondrej Urban, CSG President
- Milan Lukas, CSG Past President

**Joint Scientific Program Committee**
- Carolina Olano, Uruguay
- Joost Drenth, The Netherlands
- Gerhard Rogler, Switzerland
- David Sanders, UK
- Tomas Hucl, Czech Republic
- Radan Bruha, Czech Republic
- Ilja Tacheci, Czech Republic
- Geoffrey Metz, Australia

As you know, Prague is a city with a unique potential to host such top international events.

Gastro 2020 is to be held in a brand-new spacious and multi-functional congress venue. Prague is easily accessible to visitors coming both from nearby and distant destinations, it prides itself a well-organized and efficient city transport system and a sufficient number of hotels of all categories. Last but not least, Prague has the reputation of a most attractive, friendly and safe city for tourists from all over the world.

We look forward to welcoming you to Prague for an exciting and interactive meeting.
WDHD 2020: Message from the Co-Chairs

GUT MICROBIOME: A GLOBAL PERSPECTIVE

Dear Colleagues,

Our gut microbiome contains tens of trillions of microorganisms and over 1,000 known species of bacteria,¹ all of which have many important functions within the human body. Not surprisingly, there has been considerable interest and even more speculation on the role that gut microorganisms might play in health and disease and we, as gastroenterologists are often called upon to interpret, on behalf of our patients, the latest findings from basic and clinical research. To help us sift through and assess this vast, complex, at times confusing and ever-increasing body of literature and provide some guidance to the practicing clinician and his/her patient, the World Gastroenterology Organization selected the Gut Microbiome as the focus of the 2020 World Digestive Health Day campaign.

By increasing awareness worldwide of the role that the gut microbiome may have in diagnosis, and how it can be modulated to treat disease and allay symptoms, we can affect overall human health, in particular, among low- and middle-income countries. The WGO global network of WGO member societies, partners, and sponsors is ideally positioned to work with WGO to raise the level of awareness.

WGO will seek to raise awareness of the function of the gut microbiome through its annual public advocacy and awareness campaign, World Digestive Health Day. WDHD is celebrated each year on 29th May with associated events, activities, and initiatives continuing throughout and beyond the campaign year. WDHD will provide all those who care for individuals afflicted by gastrointestinal disorders, as well as the lay public with an understanding of the latest basic and clinical research in the gut microbiome and what it means for their well-being. This campaign will endeavor to inform physicians, pharmacists, allied health professionals, healthcare payors, and the public of the importance of the gut microbiome to overall health. Most especially, we want to ensure that we present information about the gut microbiome in a way that makes it clear what the benefits are and, in doing so, to counter misinformation about the gut microbiome.

WGO’s task is supported by a Steering Committee with a global perspective. The Steering Committee provides expertise on the gut microbiome, guides the course of the campaign, and develops educational and training materials. In collaboration with WGO Member Societies, WGO Training Centers and Regional Affiliate Associations, the Steering Committee develops this global initiative and provides the resources to sustain the effort throughout the year.

Through a multi-faceted campaign, WGO will provide simple messages for the general public in order to assist them in understanding how the gut microbiome affects the health of, not only the digestive systems, but the entire body. Secondly, WGO will develop information for healthcare professionals with an emphasis on those in low-resource, developing regions of the world. Multiple informational pieces are planned and will be distributed worldwide, for patients and healthcare professionals alike. Through the WDHD 2020 campaign, WGO looks forward to providing a better understanding of the gut microbiome. Your participation, through educating the public, encouraging participation in informational programs and promoting healthy lifestyle, is crucial for the success of this campaign.

Sincerely,

2020 WDHD: Gut Microbiome: A Global Perspective

The World Digestive Health Day (WDHD) theme in 2020 is the Gut Microbiome: A Global Perspective led by Co-Chairs Eamonn MM Quigley, MD, FRCP, FACP (United States) and Uday C. Ghoshal, MD, DNB, DM, FACP (India), and the WDHD 2020 Steering Committee. WGO calls on its member societies, regional affiliates, and partner organizations to organize events to raise awareness around the 2020 theme. Watch the WDHD website at www.worldgastroenterology.org/wgo-foundation/wdhd and WGO publications as more information, tools, and resources become available.

Aims of WDHD 2020
- Raise awareness of the role of gut microbiome in health and disease.
- Provide gastroenterologists, hepatologists, their patients, and the lay public with an understanding of important findings from the latest basic and clinical research of the gut microbiome.
- Develop educational and training materials on the key facts about the gut microbiome, in doing so, dispel myths and misinformation about the gut microbiome.
- Stimulate international collaborations that foster improved education, research, and training on the role of the gut microbiome.
- Update health care practitioners and the public on the role of the gut microbiome in diagnosis and how it can be modulated to treat disease and/or allay symptoms.

Meet the WDHD 2020 Steering Committee
The World Digestive Health Day 2020 campaign is led by the following individuals representing a global view and expertise on the Gut Microbiome. They will guide the course of the campaign, leading the development of tools and resources.

Co-Chair World Digestive Health Day 2020
Eamonn MM Quigley, MD, FRCP, FACP
The Methodist Hospital
United States

Uday C. Ghoshal, MD, DNB, DM, FACP
Sanjay Gandhi Postgraduate Institute of Medical Sciences
India

Members
Chair, WGO Foundation and President-Elect, WGO
Guilherme Macedo, MD, PhD
Centro Hospitalar Sao Joao
Portugal

Vice Chair, WGO Foundation
Richard Hunt, FRCP, FRCPEd, FRCPCH
McMaster University Health Science Centre
United Kingdom

Julio Bai, MD
University Del Salvador
Argentina

Jasmohan S. Bajaj, MD
Virginia Commonwealth University
United States

Premysl Bercik, MD
McMaster University
Canada

Catherine Buckley, MD
APC Microbiome Institute
Ireland

Paúl Cárdenas, MD, PhD
Universidad San Francisco de Quito, Institute of Microbiology
Ecuador

Henry Cohen, MD, PhD
University of the Republic Uruguay
Uruguay

Francisco Guarner, MD
University Hospital Vall D’Hebron
Spain

Kok Ann Gwee, MBBS, MMEd
Stomach, Liver and Bowel Clinic
Singapore

Saeed Hamid, MD, MBBS, FRCP
Aga Khan University Hospital
Pakistan

Gerald Holtmann, MD
The University of Queensland
Australia

Dina Kao, MD
University of Alberta
Canada
Tarkan Karakan, MD
Gazi University
Turkey

Leonid Lazebnik, MD, PhD
Moscow University of Medicine and Dentistry
Russia

Stephen J.D. O’Keefe, MBBS, MD, MSc, MRCS
The African Microbiome Institute, Stellenbosch University
South Africa

Edith N. Okeke, BMBCh
Joe University Teaching Hospital
Nigeria

Mary Ellen Sanders, MD
International Scientific Association for Probiotics and Prebiotics
United States

Fergus Shanahan, MD
University College Cork
Ireland

Ala Sharara, MD, FACG, AGAF, FRCP
American University of Beirut Medical Center
Lebanon

Miguel A. Valdovinos, MD
National Autonomous University of Mexico
Mexico

Justin Wu, MD
The Chinese University of Hong Kong
Hong Kong

Plan Your Own WDHD Event
Start planning your event today. Past events include public campaigns, courses and lectures on treatments of the current theme, walkathons, national meetings, press conferences, radio and television interviews, developing a country’s own WDHD Day, publications, and much more!

To officially submit your event for inclusion on the WGO Meetings and Events calendar, please visit www.worldgastroenterology.org/forms/submit-event.php and complete the online form.

Email info@worldgastroenterology.org with any WDHD related questions.

Join WDHD on Social Media
Join the conversation in support of WDHD 2020, tag WGO on Facebook, Twitter, LinkedIn and Instagram. Be sure to include #WDHD2020 and #GutMicrobiome in your post.

Like @WorldGastroOrg on Facebook
Follow @WorldGastroOrg on Twitter
Follow WGO/WGO Foundation on LinkedIn www.linkedin.com/company/world-gastroenterology-organisation-wgo-wgo-foundation
https://www.instagram.com/worldgastroorg/
World Digestive Health Day 2019 in Odisha, India

The Kalinga Gastroenterology Foundation (KGF), Cuttack, the Department of Gastroenterology, SCB Medical College, Cuttack and the Odisha State Chapter of ISG jointly organised the event to celebrate World Digestive Health Day 2019 on 29th May for the thirteenth straight time in Odisha, India. Its theme was in conformity with the World Gastroenterology Organisation and The WGO Foundation campaign focusing on “the Early Diagnosis and Treatment of GI Cancers”. It was held at Pramod Convention and Club Resort in Cuttack, India and was attended by about 200 physicians, gastroenterologists, oncologists and post-graduate medical students from across the state of Odisha.

Professor Shivaram Prasad Singh, Chairman, KGF and past president of Indian Society of Gastroenterology (ISG) gave the introductory lecture in which he alluded to the history of WGO and how the birthday of WGO was aptly being celebrated as the World Digestive Health Day on this date. He also spoke on how KGF was in the forefront of observing WDHD in Odisha and India every year since 2007. Prof. Singh also read out the message from Drs. Kentaro Sugano, Joseph Sung and Richard Hunt, the co-chairs of WDHD 2019 which stated that “through the WDHD 2019 campaign WGO looks forward to providing a better understanding and recognition of the Early Diagnosis and Treatment of GI Cancer” and that this would help reduce cancer related deaths worldwide.

The ceremony was inaugurated by the chief guest, Prof. Lalatendu Sarangi, Director, Acharya Harihar Regional Cancer Centre [AHRCC], Cuttack in keeping with the Indian tradition, with the lighting of the auspicious lamp (“Deep Prajvalan”). Prof Sarangi, who is an eminent oncologist of the state, welcomed the delegates and congratulated KGF for organising the event and various other public awareness campaigns consistently. He further stressed on how creating awareness in general public about the key risk factors, screening, early diagnosis and treatment of GI Cancers can significantly reduce the disease burden in the society.

A symposium entitled “Prevention
of GI Cancers” was the key highlight of the evening. It was moderated by Prof SK Acharya, Pro-Chancellor, KITTS University, Bhubaneswar. The introductory lecture of the symposium was delivered by Prof Niranjan Rout, Dean, Acharya Harihar Regional Cancer Centre, Cuttack. Prof. Rout elaborated on how “Community Cytology has emerged as a tool for rapid cancer diagnosis”. He further narrated his experience regarding AHRCC initiated Community Cytology programs in remote resource constrained regions of Odisha; he felt this not only took cytological services to the doorstep but also created awareness about cancer prevention and to a large extent mitigated the stigma involving cancer in the community.

Following this, Prof Manoj Kumar Sahu, Professor and Head, Department of Gastroenterology, SUM Hospital, Bhubaneswar, spoke on “Prevention of Gastric cancer” and discussed the clinical manifestations, screening modalities and preventive strategies vis-à-vis Gastric Cancer. Professor Manas Kumar Panighrahi, of Department of Gastroenterology, AIIMS, Bhubaneswar gave an exhaustive presentation on “Prevention of Colon Cancer”. He lucidly explained the significance of “Prevention” by giving the example Cyclone “Fani” that had hit coastal Odisha, and how the preparedness and quick action by the Odisha government had averted mass casualties.

After this, Dr. Preetam Nath of the Department of Gastroenterology, KIMS, Bhubaneswar spoke on “Prevention of Pancreatic Cancer”. He discussed about the various dietary and lifestyle modifications that could help prevent the dreaded disease. In addition, he also discussed the importance of screening for pancreatic cancer in high risk individuals. This was followed by Q&A session and panel discussion involving the moderator Prof. SK Acharya, the speakers and delegates. The panellists stressed on the need for careful evaluation and screening for malignancies in not only the patients visiting OPDs for various illnesses but also in their family members and community at large.

Following the symposium, a brochure in local language Odia on “Prevention of Gastrointestinal and Liver Cancer” was released with the purpose of creating awareness on the subject in the general population. The program ended with an expression of thanks offered by Dr. Sushant Kumar Sethi, senior consultant gastroenterologist at Apollo Hospitals in Bhubaneswar.
The Biocodex Microbiota Institute is the first international reference platform offering expertise on human microbiota, intended for both health professionals and the public.


In a nutshell:
- A Website in 6 Languages
- More than 500,000 visitors in 2019
- 9 Newsletters
- 10 Thematic folders
- 15 Videos
- More than 300 Current Topics
- 10 new articles per month

DONATE TODAY

Contributions to The WGO Foundation support and expand the educational, training, research, and awareness programs and initiatives of WGO by strengthening the reach of WGO to areas in the world that benefit directly from the education offered through programs such as Training Centers, Train the Trainers, World Digestive Health Day (WDHD), Global Guidelines, and meetings such as the World Congress.
A Celebration of the World Congress of Gastroenterology in Istanbul!

Carolina Olano, MD  
WCOG 2019 Scientific Program Committee Co-Chair

Sedat Boyacioglu, MD  
WCOG 2019 Scientific Program Committee Co-Chair

More than 2,000 gastroenterologists, hepatologists and other health care professionals from 95 countries around the world convened at the Istanbul Congress Center in Istanbul, Turkey for the World Congress of Gastroenterology from 21 – 24 September 2019. The Congress reviewed the latest scientific advances in gastrointestinal and hepatological research, treatment of digestive diseases and clinical practice management.

On behalf of the WCOG 2019 Joint Steering Committee: Co-Chairs, Professors Cihan Yurdaydin and Serhat Bor, and its members, Professors Naima Amrani, Guilherme Macedo, Necati Örmeci, and Nurdan Tözün, the World Gastroenterology Organisation (WGO) along with the Turkish Society of Gastroenterology (TSG) are honored to have co-hosted this outstanding Congress. We also extend our thanks for the hard work and dedication of our fellow members of the Joint Scientific Program Committee: Professors Jonathan Leighton, Alexander Ford, Hale Akpinar and Murat Törüner.

This global gathering represented the first time the World Congress of Gastroenterology has been held in Istanbul, a location that spans two continents.

2019 was an outstanding year for registration and abstract submissions with over 1,000 posters and oral presentations. The abstracts submitted by delegates represented all corners of the world.
of the world — Africa/Middle East: 525; Americas: 69; Asia Pacific: 248; and Europe: 174. The poster sessions and oral presentations provided an opportunity for delegates to showcase their scientific research and discuss their posters, garner insight from the experts, and make new contacts with other attendees in a low-key, relaxed environment.

The Congress was also comprised of 178 high-level scientific programs; three post-graduate courses; 32 symposia, 11 sunrise sessions, and a video endoscopy session. The WCOG 2019 Scientific Program Committee, along with the Postgraduate Course directors, brought together internationally recognized experts and rising stars in the field. The program delivered the latest clinical updates in gastroenterology and hepatology, plus discussion of what is on the horizon that may be impactful. Among the highlights of this year’s scientific presentations were significant findings and innovative technologies for the prevention, diagnosis and treatment of digestive diseases and serious GI-related health issues.

Given a large international presence, especially from Eastern Europe, Central Asia and Turkey itself, many sessions offered simultaneous Russian and Turkish interpretation — a first for a World Congress of Gastroenterology.

WGO and TSG conducted various exciting activities throughout the Congress. The exhibit hall featured poster presentations, theater presentations, and hands-on sessions, offering a remarkable experience for all attendees. WGO’s exhibit booth showcased the many programs and activities of WGO, built around the four pillars of WGO’s mission: Advocate, Train, Inform and Educate.

WGO was able to offer a limited number of travel grants to scholars to attend the World Congress. The many qualified applications were prioritized taking into account factors such as abstract submission, geographic and gender balance, educational need, and a personal statement. We are pleased to feature testimonials from three trainees from WGO Training Centers. These appear in this issue starting on page 27.

**WGO General Assembly**

Additionally various WGO and TSG related meetings also took place, including many committee and interest group meetings and the WGO General Assembly — to which all WGO Member Societies were invited. WGO was pleased to welcome societies from the following countries: Albania, Australia, Bolivia, Bosnia and Herzegovina, Brazil, China, Costa Rica, Croatia, Dominican Republic, India, Iran, Jordan, Korea, Morocco, New Zealand, Nigeria, Peru, Romania, Russia, Serbia, Taiwan and Uruguay. Many important actions took place during the General Assembly, including the handover of the WGO Presidency from Cihan Yurdaydin, 2017-2019 WGO President, to Naima Amrani, 2019-2021 WGO President; ratification of the World Congress of Gastroenterology 2023 to take place in Seoul, Korea; the presentation of the 2019-2021 Nominations for WGO Committees and Interest Groups; and the announcement of the 2019 Masters of the WGO (MWGO) award recipients (See page 24 for an overview of the Master of the WGO (MWGO) award).
Awards
The WCOG 2019 meeting also recognized various individuals with a distinguished background in the gastroenterology and/or allied fields. We would like to honor the following recipients who received prestigious awards during the meeting:

**Professor Michael Fried**, recipient of the 2019 WGO Georges Brohée Medal and Lecture on “Evidence Based Medicine: How Good is the Evidence?” (please see page 23 for this article)

**Professor Richard Kozarek**, recipient of the 2019 WGO Henry L. Bockus Medal and Lecture on “The Evolution of Therapeutic Endoscopy: Where Have We Been? Where Are We Going?” (please see page 22 for this article)

**2019 Masters of the World Gastroenterology Organisation (MWGO):**

- T.S. Chandrasekar (India)
- Henry Cohen (Uruguay)
- Daiiming Fan (China)
- Makki H. Fayadh (Iraq)
- Peter Ferenci (Austria)
- Eamonn Quigley (USA)
- James Touli (Australia)

(for more information please see the MWGO article on page 24)

Premiere Journal of Clinical Gastroenterology (JCG) Lectureship
Chairied by Professor Ronnie Fass, Editor-in-Chief of the *JCG* and Professor Alejandro Piscoya, Chair of the WGO Publications Committee, the World Congress for the first time featured a *JCG* Lectureship. This included presentations by Professor Carol Burke – “Sessile Serrated Polyps - Cancer Risk and Appropriate Surveillance” and Professor Xavier Calvet – “1st, 2nd and 3rd Line Treatment for *H. pylori* Infection in 2019.”

The session was well attended and each lecture was well received by the audience. At the end of the session there was a very vibrant discussion and many questions were asked. Overall, the first annual *JCG* lectureship was a great success and it is expected to become an important feature of future WGO meetings.

Women in GI session
WGO was pleased to convene this session for the first time at our World Congress, which was chaired by Professors Naima Amrani, Maryam Al Khatty and Hale Akpinar. The Women in GI session was well-received and featured talks around career opportunities for women, mentorship and tools for establishing an academic and successful career. —see article on page 26.

Train the Trainers Alumni Luncheon
Since 2001, WGO has sponsored 27 Train the Trainers workshops, which consist of over 1,000 alumni from more than 90 countries, including both participants and faculty. We were pleased to host once again an alumni luncheon on 22 September for these participants to reunite, connect and, for others, meet for the first time.

The basis and success of the TTT workshops is that they are designed to be collaborative. This was truly reflected in the enthusiastic interaction among the many alumni and faculty who attended this luncheon. It confirmed that TTT is one of the most esteemed and popular programs that WGO offers.

Upcoming Congress and Conferences
We hope all attendees had the opportunity to connect with your colleagues from around the world and we cordially invite you to attend the upcoming Gastro 2020, which will be held from 3-5 December 2020 in Prague, Czech Republic, and the next World Congress of Gastroenterology 2021, 12-15 December 2021 in Dubai, UAE!
Richard Kozarek, MD, MWGO is the 2019 WGO Henry L. Bockus Medal Recipient

Richard Kozarek, MD, MWGO received the WGO Henry L. Bockus Medal and presented his lecture on the topic, “The Evolution of Therapeutic Endoscopy: Where Have We Been? Where Are We Going?” This session took place during the World Congress of Gastroenterology 2019 in Istanbul, Turkey.

Dr. Kozarek has been a member of the Section of Gastroenterology at Virginia Mason Medical Center since 1983, serving as Chief of GI for 15 years and currently as the Executive Director of the Digestive Disease Institute for the past 13 years, as well as Clinical Professor of Medicine at the University of Washington since 1990. In a career spanning 40+ years, Dr. Kozarek has contributed almost 600 scientific papers, invited reviews, editorials, and book chapters, and 12 books to the medical literature on topics ranging from therapeutic endoscopy, inflammatory bowel diseases, pancreatic disorders, and practice economics.

A past president of the ASGE (American Society of Gastrointestinal Endoscopy), he received his highest honor, the Rudolph Schindler Award in 2005. He is also a past-president of both the World Gastroenterology Organisation (2009-2011) and the Society for Gastrointestinal Intervention.

Dr. Kozarek attended his first World Congress of Gastroenterology in Stockholm in 1982. He acknowledges past WGO presidents with whom he has had the honor to work with to include Meinhard Classen, Guido Tytgat, Eamonn Quigley, Henry Cohen, Jim Tooili, David Bjorkman, Cihan Yurdayin, and newest president, Naima Amrani.

He and his wife of 46 years, Linda have two daughters and two granddaughters; the latter can do no wrong.

About the WGO Henry L. Bockus Medal and Lecture

A medal, known as the Henry L. Bockus Medal, is awarded at each World Congress to a gastroenterologist who, in the opinion of the World Gastroenterology Organisation (WGO) Governing Council, has made a distinguished contribution to the clinical practice, science and/or teaching of gastroenterology.

Dr. Henry L. Bockus (1894-1982) was a leading American gastroenterologist from Philadelphia, Pennsylvania with a well-deserved reputation due to the authorship of an outstanding Gastroenterology treatise and the organization of specialty postgraduate courses at the University of Pennsylvania, which were attended by numerous physicians from North and South America as well as from Europe. He was elected President of the first World Congress of Gastroenterology, held in Washington, DC, USA on 29 May 1958. On the last day of the Congress a provisional WGO Governing Council was elected, and Dr. Bockus became the first president of what is now the World Gastroenterology Organisation. His vision to enhance standards of education and training in gastroenterology lives on today.
Michael Fried, MD, MWGO is the 2019 WGO Georges Brohée Medal Recipient

Michael Fried, MD, MWGO received the WGO Georges Brohée Medal and presented his lecture on the topic, “Evidence Based Medicine: How Good is the Evidence?” This session took place during the World Congress of Gastroenterology 2019 in Istanbul, Turkey.

Prof. Fried studied medicine at the Universities of Berlin and Munich, Germany. He trained as a Gastroenterologist in the University Hospital Basel, Switzerland. Prof. Fried then worked as a Research Fellow at the UCLA School of Medicine, Los Angeles and continued his research focusing on the neurohormonal regulation of the upper gastrointestinal tract at the University of Basel, funded by the Swiss National Science Foundation. He was appointed Associate Professor at the University Basel in 1989. In the same year, Prof. Fried became Senior Resident at the University Lausanne. In 1994, he was appointed Full Professor and Director of the Division of Gastroenterology at the University Hospital Zurich, becoming director of the Division of Gastroenterology and Hepatology until 2017, when he became Professor Emeritus. Since then, Prof. Fried is directing the International Office of the Zurich University Hospital and working as a Consultant at the City Hospital Triemli in Zurich.

Prof. Fried was President of the Swiss Society of Gastroenterology and Hepatology. He served as a Member of the Executive Committee for the World Gastroenterology Organisation (WGO) and was Chair of the WGO Guidelines and Publications Committee. He was President of the Association of the Division Directors at the University Hospital. Furthermore, Prof. Fried supports science and research by acting as president and board member of numerous scientific foundations and societies. He has received several distinctions and awards, including the Honour Award and the National Prize of the Swiss Association of Gastroenterology, the Ludwig-Demling-Award and the Prix Giuliani. He is Fellow of the American Gastroenterological Association and the American College of Gastroenterology. In 2015, Prof. Fried received the Master Award of the World Gastroenterology Organisation.

About the WGO Georges Brohée Medal and Lecture
A Brohée Lecture is delivered during each World Congress of Gastroenterology to commemorate Georges Brohée, the founder of the first International Association of Gastroenterology. The Brohée Lecturer is chosen by the WGO Governing Council from either the host country or the respective region. A Medal is presented to the nominated lecturer during the World Congress in which the lecture is presented.

The World Gastroenterology Organisation (WGO) originated largely due to the initiative of Dr. Georges Brohée (1887-1957), a Belgian Surgeon and Radiologist who promoted modern Gastroenterology, in particular by founding the Belgian Society of Gastroenterology in 1928 and by organizing the first International Congress of Gastroenterology in Brussels in 1935. His continuing efforts culminated in the constitution of the “Organisation Mondiale de Gastro-entérologie” (OMGE) on 29 May 1958 in Washington, DC, USA where the first World Congress of Gastroenterology was held.
WGO Announces Recipients of the Masters of the WGO (MWGO) Award

Established in 2009, the Master of the WGO (MWGO) Award is the highest honor the World Gastroenterology Organisation (WGO) can bestowed on a member and is granted only to those individuals who have provided outstanding dedication to the mission of the WGO and achieved distinction in such areas as scholarly research, teaching, and service to WGO and the community at large.

The MWGO Award was created to recognize these contributions and by this recognition provide incentive, encouragement, and guidance for others to significantly contribute to their fields. The Masters of the WGO Award is a capstone career award and is given in conjunction with each World Congress of Gastroenterology.

Recipients of the 2019 Masters of the WGO Award were recognized with an engraved plaque at the WGO General Assembly during the World Congress of Gastroenterology 2019 on Monday, 23 September 2019 in Istanbul, Turkey. Recipients may now use the title of “Master of the WGO” and the letters “MWGO” in conjunction with their name.

Please join WGO in congratulating the 2019 recipients of this prestigious award!

T.S. Chandrasekar, MWGO (India)
Henry Cohen, MWGO (Uruguay)
Daiming Fan, MWGO (China)
Makki H. Fayadh, MWGO (Iraq)
Peter Ferenci, MWGO (Austria)
Eamonn Quigley, MWGO (USA)
James Touli, MWGO (Australia)

Past recipients of the MWGO Award include
Julio Bai, MWGO (Argentina)
Luiz de Paula Castro, MWGO (Brazil)
Suliman Fedail, MWGO (Sudan)
Michael Fried, MWGO (Switzerland)
Jean Paul Galmiche, MWGO (France)
Joseph Geenen, MWGO (USA)
Khean-Lee Goh, MWGO (Malaysia)
Richard Hunt, MWGO (UK)
Richard Kozarek, MWGO (USA)
Günter Krejs, MWGO (Austria)
Bernard Levin, MWGO (USA)
Juan Malagelada, MWGO (Spain)
Finlay Macrae, MWGO (Australia)
Solly Marks, MWGO (South Africa)
Ibrahim Mostafa, MWGO (Egypt)
D Nageshwar Reddy, MWGO (India)
Melvin Schapiro, MWGO (USA)
Isidor Segal, MWGO (South Africa)
Zeyad Sharaiaha, MWGO (Jordan)
Shuji Shimizu, MWGO (Japan)
Joseph Sung, MWGO (China)
Rakesh Tandon, MWGO (India)
Sandie Thomson, MWGO (South Africa)
Guido Tytgat, MWGO (The Netherlands)
Guido Villa-Gomez, MWGO (Bolivia)
Shu-Dong Xiao, MWGO (China)

Prof. T.S. Chandrasekar, MWGO is presented with the MWGO award by Prof. David Bjorkman

Prof. Henry Cohen, MWGO is presented with the MWGO award by Prof. Naima Amrani

Prof. Daiming Fan, MWGO is presented with the MWGO award by Prof. Guilherme Macedo

Prof. Makki Fayadh, MWGO is presented with the MWGO award by Prof. Naima Amrani

Prof. Peter Ferenci, MWGO is presented with the MWGO award by Prof. Cihan Yurdageldin

Prof. Eamonn Quigley, MWGO is presented with the MWGO award by Prof. Cihan Yurdageldin

Prof. James Toouli, MWGO is presented with the MWGO award by Prof. David Bjorkman

2019-2021 Executive Committee posed with the 2019 MWGO recipients
The positive energy in the room was palpable at the first ever Women in GI session at the World Congress of Gastroenterology in Istanbul in September 2019.

The speakers were Guadalupe Garcia Tsoo and Christina Surawicz from the United States, Carolina Ciacci from Italy and Nurdan Tözün from Turkey, with moderators Naima Amrani from Morocco, who is the first woman president of the WGO, Maryam Al Khatry of the UAE and Hale Akpinar also of Turkey.

Prof. Amrani has stated that one of her main objectives while serving as WGO President is to engage more women in WGO activities around the world. This symposium served as a launch for those initiatives.

Topics included:
1. Career Opportunities for Women in GI
2. Role of Women Mentors and How to Establish an Academic Career in GI
3. Do Women in GI Have the Same Opportunities in the East and West?
4. Tips and Tricks for a Successful Career in GI: Pearls from an Expert

There were several important points:
1. Women are underrepresented in leadership roles in academic medicine. Women lag in promotion in academic medical centers with only a small percentage reaching full professor levels in the United States and only 14-15 becoming department chairs in academic medicine in the United States.
2. Women are underrepresented in GI, probably around the world. There are relatively more in hepatology and the fewest are in therapeutic endoscopy.
3. In many studies, women are paid less than men for the same work.
4. Why are there fewer women than men in leadership in medicine? There is both a glass ceiling (this refers to an invisible barrier that prevents women from reaching higher levels) and a leaky pipeline (this refers to women leaving at all different stages in their careers). Factors contributing to the glass ceiling include institutional culture (which may not be as supportive of women), lack of support for work life integration, and bias, both conscious and unconscious. The leaky pipeline is due in part to lack of mentoring and lack of leadership training for women.
5. Identifying these issues provides clear path for improvement, which will improve workforce both women and men. Reasons for this are multiple but include lack of mentoring and role models, lack of support for work life integration including quality on side daycare for those with small children, opportunities for part time work for both men and women, and unconscious bias.
A Recognition of New Knowledge, Revival of New Ideas and Acquaintances with Impressive People

Talant Salamakunov, MD
Kyrgyzstan

Istanbul is the meeting point of the world. Yes, it was in the noisy and fabulously beautiful city of Istanbul that the World Congress of Gastroenterology was held from 21 -24 September 2019. It was a good opportunity to see Istanbul and replenish your knowledge.

The weather in the city was wonderful. Doctors from around the world gathered in Istanbul. Some had fatigue due to long flights. Many were joyful, which was evident by the smiles on their faces, including mine. There was the opportunity to learn new knowledge and get acquainted with the new work of the professors, where they presented on new international studies across five large plenary rooms.

There were such expressions “At conferences, the most interesting reports are read simultaneously in different working groups.” Watching the presentation program, I realized that the above phrase is very true. But everyone will take what interests them. The topics were all large-scale and interesting.

I am Dr. Talant Salamakunov, a trainee at the WGO Ankara Training Center and through a travel grant supported by WGO, I was able to attend the World Congress. The large scale of the WCOG had a positive impact. Carefully observing the presentations, one could think about further paths, their scientific work, clinical trials and their level of clinical experience. I watched the presentations with interest, motivating myself to new ideas. There was also the opportunity to meet new acquaintances and friends. As a beginner and a young specialist, it was very interesting and informative. I think the knowledge gained will show me the way in my work practice.

On the first day of the congress, the following sessions can be noted: Everything about the esophagus and stomach. Another session that drew my attention was about the intestinal flora, which, in my opinion, has not yet been fully studied. And of course, the pharmacological part of the presentations was interesting.

Day Two: Diagnosis, screening and treatment of one of the global problems of malignant GI tract disease attracted more attention. I also listened with interest to Dr. Jaw-Town Lin’s presentation on H. pylori eradication and work on the complication of post-bariatric surgery.

Day Three: It was even more interesting because the program had sessions about EMR, ESD. Drs. Vibor Arantes, Adolfo Para Blanco, Yutako Saito and Fatih Aslan made a brilliant presentation about their work. Good presentations were held on topics about the disease of the esophagus, liver and pancreas. Many doctors have observed courses in US diagnostics.

The fourth and final day of the topic of therapy and monitoring of IBD, PPI therapy for GERD, Infection GI tract was of interest to many. Drs. Klaus Monkemuller, Mark Topazian and Neena Abraham showed interesting clinical cases about bleeding of the upper gastrointestinal tract.

And of course it was interesting to observe the work of Drs. Nageshwar Reddy, Elias Makhoul, and Ibrahim Mostafa about difficult situations in ERCP.

The world does not stand still and in medicine, too, in order to achieve good results you must move together with the world, and if you are still a doctor, you will have to move together with medicine.

Why do we need medical conferences?
Science in the modern world is developing very rapidly. Discoveries occur in all spheres of human life, including medicine. Currently, there are many problems around the world in the field of maintaining health and treating diseases. And while it is still not possible to overcome some of them, others are resolving every day faster and more efficiently. New treatments are being created, drugs and so on. And, of course, if all the medical companies and the best minds in the industry work together, the result will be much better. For this, medical scientific conferences are held.

I want to note three main reasons for the conference:
1. To share your scientific discoveries and thoughts with other bright minds in the industry.
2. To state to young specialists who are interested in the industry their
thoughts and points of view on certain medical issues.

3. To advertise their discoveries, new drugs, ideas and techniques that are necessary in the medical industry.

This raises the question of competition, of course. But, as one wise man said, it is better to keep a competitor close. In addition, the world of medicine is so huge that there is enough room for everyone. There are still a huge number of unresolved issues. Such events are an ideal place to find common solutions if the conference participants have new ideas. Any scientific or practical medical conference is another step forward in the world of medicine. Frequent participants in the conferences are young specialists who have carried out a particular scientific work or wish to make a report on a specific topic. Young researchers are sometimes authors of innovative ideas and theories that deserve much attention. And the best place where young minds can share their thoughts with the world’s greatest scientists and specialists is a scientific and practical medical conference. Moreover, a certificate of participation in this event will greatly help with further training and employment.

In addition, participation in such conferences is very inspiring and broadens the horizons of the generation, which in the future plans to connect its fate with the profession of a doctor.

Any medical international conference is a Klondike of ideas and thoughts, theories and developments. With joint participation in such events, medical geniuses and institutions can solve problems in this area much faster. After all, joint work is always more effective than independent. If you want to move together with medicine, learn new works and determine the path to your work - a scientific-medical conference is what you need.

It was a great honor for me to participate in the WCOG. And also to be part of this team and to interact with the best of the best -- it was an amazing experience. I want to express my gratitude to WGO, the TSG, WGO Ankara Training Center, the organizers and all my colleagues for the productive days.
On a sunny Saturday morning in Istanbul, I made my way to the Istanbul Congress Center. The congress was organized by World Gastroenterology Organisation (WGO) and Turkish Society of Gastroenterology (TSG). The Istanbul Congress Center is an international event destination, boasting world-class technological infrastructure and is located near Taksim Square where shops and restaurants are open 24/7.

The first day of the Congress started with postgraduate course - “Hot Topics in Gastroenterology” in the form of lectures provided by world-renowned presenters. These sessions provided comprehensive reviews of gastroenterology and hepatology conditions including the management of clinical problems one sees every day in practice.

A parallel session, postgraduate course, “The Bugs Among Us: Microbiota in Health and Disease,” was held in Troy Hall; in addition there were endoscopy video sessions taking place in Aspendos Hall. Each session was concluded by a refreshing tea break, which was very good as it gave everyone enough time to relax and build up energy before next session, but it was also a good time to meet colleagues from different WGO Training Centers. On the last day, there were interesting talks in IBD, EUS and functional GIT disorders. After lunch, Prof. Ibrahim Mostafa delivered an excellent presentation on ERCP in patients with surgically altered anatomy. Overall, this was an excellent meeting, which was a welcomed revision for me just before my certificate exams.

Finally, I would like to thank the TSG and WGO for the travel grant, and the South African Gastroenterological Society (SAGES) for giving me this opportunity to attend and extend my knowledge. It was both a personal and academic growth experience.
I was excited to attend the World Congress of Gastroenterology in Istanbul, Turkey from 21-24 September, as this is an important period in my education. I am studying at the Ankara Baskent University Hospital affiliated with the WGO Ankara Training Center with the support of the World Gastroenterology Organisation.

First of all, I would like to thank WGO for providing me with this opportunity. This was the first World Congress of Gastroenterology experience in my career and I would very much like to attend upcoming meetings. During this WCOG, I was very happy with the special attention presidents of World Gastroenterology Organisation and Ankara Training Center.

I attended all of the WCOG meetings in the five different halls with great enthusiasm and made many notes to myself about the results of the research of professors from around the world. The sessions on IBD treatment and follow-up as well as advanced endoscopic procedures were of particular interest to me.

I also applaud that WGO is working not only for developed countries but also for developing countries in the management and treatment of diseases that cause global problems.

Another issue that attracted my attention was the project of female gastroenterologists. I think we must show the world how women are successful and indispensable individuals in such a challenging career like gastroenterology. I would like to thank the proponents of this endeavor at WGO.

I think that the information I have gained from such meetings in future professional studies will guide me and I am grateful to WGO for their contribution to my education.
WGO Welcomes Two New Member Societies!

On 23 September 2019, during the General Assembly, two Member Societies were officially ratified as new members of World Gastroenterology Organisation (WGO). We are honored to welcome them into the WGO family and are pleased that these societies further extend our worldwide reach as they represent nations in Africa and the Middle East.

As members of WGO, these societies are now able to participate in various activities around the globe, such as World Congresses of Gastroenterology, Train the Trainers workshops, and access to WGO Training Centers. They also enjoy many other benefits, including access to WGO Global Guidelines & Cascades, listing on the WGO website, and global promotion of programs and events. If your society is not yet a member we hope that you will consider applying. Details can be found on the WGO website at: http://www.worldgastroenterology.org/membership/prospective-member-societies.

A brief description of each of the two WGO Member Societies is shared below:

**Azerbaijan Gastroenterologists and Hepatologists Society**

The Azerbaijan Gastroenterologists and Hepatologists Society was founded in the capital city of Baku in 2006. The society’s leadership includes Dr. Gulnara Aghayeva, President; Dr. Raksana Calilova, Secretary; and Dr. Sevda Aghayeva, Secretariat.

The Society is active in the organizing of conferences, symposia, seminars, and gastroenterology days. In 2019 they hosted the Asian Pacific Association for the Study of the Liver Single Topic Conference 2019 on Hepatitis Delta.

**Egyptian Association for Research and Training in Hepatogastroenterology (EARTH)**

EARTH was inaugurated in 2017 with mission to advance and disseminate the science and practice of hepatology, and gastroenterology and to promote liver health and quality of patient care through focusing on training of the Egyptian physicians working in this field and enhancing the research work.

EARTH aims to be the leading organization of Egyptian scientists and health care professionals committed to preventing and curing liver and gastrointestinal diseases.

The Society’s President is Dr. Mohamed El Kassas, its Secretary is Dr. Mohamed Alborai and Dr. Mahmoud Baioumy is EARTH’s Secretariat.
Tribute to Professor Meinhard Classen, WGO President, 1998-2002

* 12 August 1936; † 6 October 2019

WGO joins with so many organizations, colleagues and friends who knew Prof. Meinhard Classen and shares below testimonials of a man who was an instrumental and irreplaceable asset to the field of gastroenterology. A true pioneer and mentor of the specialty worldwide, Prof. Classen led a long and distinguished career, having received many honors and awards as well as serving as president of several scientific and medical societies, organizations and committees.

A decorated role model to many colleagues around the world, Prof. Classen was committed to the education and training of young gastroenterologists, serving as a speaker at many courses and meetings regularly.

Prof. Classen was truly a humanitarian, devoting his time and expertise to several initiatives in the developing world.

At WGO, we were privileged to also know him as President from 1998-2002 and Secretary General, from 1990-1998. Prof. Classen also served as the founder and co-chairman in the establishment and development of the International Digestive Cancer Alliance (IDCA), where he served from 2002-2008.

Prof. Classen was 83 years old when he passed and leaves behind a legacy whose achievements will continue to shape gastroenterology for years to come.

Below we share with you some special memories from current and past WGO leadership. We invite you to also share with us any testimonials you would like to have listed on this webpage, which will remain indefinitely.

Prof. Meinhard Classen, I am already missing you but the memories will be present forever

The passing away of Meinhard Classen left me overwhelmed with sadness. The field of gastroenterology has lost a great man; an outstanding scientist and physician, a talented gastroenterologist, a visionary leader, a loyal and wise President.

Our partnership was born many years ago. It was rapidly transformed on strong friendship. Meinhard was the driving force behind introducing me to the World Gastroenterology Organisation (WGO); getting me involved as a founding member of the creation of AMAGE (African Middle Eastern Association of Gastroenterology) one of the 4 Regional Affiliate Associations to WGO; and encouraging me to become an elected member of the executive committee of ASNEMGE (Association des Sociétés Nationales et Méditerranéennes de Gastroentérologie) which has since become UEG.

Meinhard, the visionary man, founded the WGO Training Centers. It was a wonderful idea which contributed to the success of the WGO mission. He created the Training Center of Rabat-Morocco (WGO-RTC), which is dedicated to all French-speaking gastroenterologists mainly from Africa who were excluded from training and education for many reasons. This helped to minimize their isolation. Thanks to him and to the support of the Gastroenterology Foundation of Munich, the WGO-RTC has been well equipped. Since the opening, Meinhard, together with Guido Tytgat, to whom I wish good health and long life, used to participate as faculty at each Annual Course at the Rabat Training Center.

Meinhard, the inspiring and enriching man involved me in the International Digestive Cancer Alliance (IDCA). This created a new level of education and training in oncology at the WGO-RTC. This step was the ultimate expression of confidence and friendship.

The world of Gastroenterology is mourning the loss of Prof. Meinhard Classen, whose generosity, especially to Africans to whom he gave so much training, education, and all kinds of support, will be remembered for all time.

Rest in peace my dearest friend and be sure that I (we) will never forget you.

– Professor Naima Lahbabi-Amrani, WGO President (2019-2021)

In Memory of Professor Meinhard Classen

The passing away of Meinhard Classen, one of my dearest international friends, left me bereaved and overwhelmed with sadness, submerged in
a flood of memories, spanning almost all my professional life and beyond. Through my regular contacts and visits since the early seventies to Erlangen, at that time the European Mecca of endoscopy, a lifelong comradeship and partnership was born, crystallized in numerous contacts and activities and a quite conspicuous parallelism of our academic careers. To illustrate, just a few of the numerous examples: Meinhard did and thought me the first sphincterotomy in the Netherlands with a home-made sphincterotome very soon after his landmark paper was published. He introduced me into German gastroenterology and endoscopy with numerous presentations at the Wiesbaden meetings. Together we published the famous atlases on endoscopy, were active with the journal endoscopy and created an international educational gastro-surgical platform to foster closer interaction between the two disciplines.

Meinhard was the driving force to introduce me in World Gastroenterology. Getting me involved in the creation of a training center in Soweto, South Africa and Rabat, Morocco was inspiring and enriching. Getting me involved in the International Digestive Cancer Alliance (IDCA), baptized at the Vatican, created a new level of educational involvement in oncology. Passing on his WGO presidency to me was the ultimate expression of mutual trust, confidence, loyalty and friendship.

The memories of a highly talented, eager, wise, loyal, compassionate, charming gentleman-like gastroenterology-prince will never fade.

– Guido NJ Tytgat, Professor Emeritus, WGO President (2002-2005)

Meinhard Classen, An Appreciation

While my involvement in WGO (or OMGE as it was then known) began with roles in the Research and Communications Committees, it became much more substantive thanks to an invitation from Meinhard, then Secretary General, and his lifelong friend Joseph Geenen, then treasurer, to consider joining the executive as Secretary General when Meinhard assumed the Presidency at the World Congress of Gastroenterology in 1998.

Over the next 4 years my education in the politics and processes of international gastroenterology took place under the guidance of Meinhard and Joe. I quickly came to recognize the status that Meinhard deservedly enjoyed around the world as a pioneering endoscopist, academic gastroenterologist and supreme statesman. His ability to negotiate while holding firm to the goals of the organization and in an atmosphere of transparency and fairness was pivotal to the development of a sound financial footing for OMGE which was a fledgling, financially fragile organization when he took the helm.

He modernized OMGE and, in so doing, ensured that it became a major player in international medicine. Ever the stately gentleman he steered his ship through the many troubled waters that it encountered with his unique combination of diplomacy, charm and integrity.

Meinhard Classen had a passion for the underserved and single-handedly initiated a program that has now blossomed into a global success for WGO – the Training Centers. Working with his friend, Isidore Segal, he established the WGO Training Center in Chris Hani Baragwanath Hospital in Soweto, South Africa. Meinhard’s idea was revolutionary – provide training in gastroenterology for those from unserved areas close to home in a center of excellence. Its impact soon became evident with the graduation of a cadre of young gastroenterologists to provide care to their countrymen in Sub-Saharan Africa. This became the template for training centers in Central and South America, North Africa, Asia and Oceania.

As OMGE/WGO grew and prospered, Meinhard was always open to new ideas and supported many novel initiatives, including other now well-established programs such as Train the Trainers and Guidelines. Later he focused on gastrointestinal cancer and campaigned to ensure a central role for the gastroenterologist in gastrointestinal cancer through IDCA, worked tirelessly to launch of a massive and much needed study on the impact of Helicobacter pylori eradication in gastric cancer prevention in China and raised money to support a cancer center in Tanzania.

Meinhard Classen was a modern giant of gastroenterology who left his indelible mark on so many aspects of our profession and in every corner of the globe. WGO will be forever in his debt.

– Professor Eamonn Quigley, WGO President (2005-2009)

Meinhard was a giant in therapeutic endoscopy, helping us make the leap from using ERCP as a diagnostic tool to one that revolutionized the treatment of pancreaticobiliary disease. His trainees to include Fritz Hagenmeuller, Thomas Rosch, and Horst Neuhaus, to name only a few, themselves became the trainers of a whole generation of gastroenterologists and therapeutic endoscopists. A Past President of WGO, Meinhard’s academic and philanthropic contributions were myriad. He will be missed, [but potentially referenced forever].

– Professor Richard Kozarek, WGO President (2009-2011)

In May 2001, Eamonn Quigley generously invited me to be part of the OMGE’s executive (now WGO). In January 2002 I attended my first meeting in Frankfurt, under the presidency of Prof. Meinhard Classen. I will never forget my first encounter...
with him. I guess I was more scared than nervous. One month later, I had to officially become Deputy Secretary General of the organization at the World Congress in Bangkok. The first evening Prof. Classen invited my wife and me to a dinner, also attended by Bridget Barbieri. This was the dialogue: “Henry, you will not be the Deputy Secretary General.” What happened? (I then thought that I had done something wrong, even before starting). “You will be the Secretary General”. I was so surprised that I told him I had to think it over. Now he was the one surprised: How is that? There are many people trying to get this position! Early the next morning, Eamonn called me and explained the reason for such a change. Of course, I accepted and the rest is a well-known story.

After that I had the chance to work with him and learn from him for years. I could tell many stories, most of them showing that Meinhard was a great and generous person that behind his seriousness, there was a very sensitive man.

– Professor Henry Cohen, WGO President (2011-2013)

It is with sadness that I learned the passing of Meinhard Classen; a giant in the Gastroenterology world. Others will comment on his major impact on hepatobiliary pancreatic investigation and management for which I give due recognition. With regard to WGO and my personal involvement he was the President who invited me to join the organization and join in fulfilling the vision to change WGO to a mainly education focused organization. I am delighted to say that this vision has been fulfilled and generations of future gastroenterologists shall be the beneficiaries. Vale Meinhard. For ever your admirer.

– Professor Jim Touli, WGO President (2013-2015)

Herein a brief comment re Professor Classen, a giant who will be missed

When I was elected as Treasurer of the OMGE in 2004, I was called to Munich to meet with the Management Group to set up our interactions in managing WGO’s finances. While there I was told that I was to be hosted for dinner by the former president, Professor Meinhard Classen, whom I had not previously met but knew by reputation. The restaurant and meal were wonderful. The conversation started like a detailed interview for a major academic position. After an hour or so of “grilling”, Professor Classen smiled and told me that I had “passed”. I displayed the right attitude, understood the goals of WGO and he was certain I would carry out my duties beautifully. The rest of the dinner was quite pleasant and he and I communicated frequently during my tenure and thereafter.

He was a dedicated, brilliant clinician and became a good friend. He will be greatly missed.

– Professor Douglas LaBrecque, WGO Treasurer (2005-2008)

Tribute to Meinhard Classen, M.D., Professor, a Dear Friend

I am deeply saddened by the loss of my dearest friend, Meinhard Classen. Our friendship started in the late 1960s, when Professor Demling, of Germany, visited Dr. Konrad Soergel, Chief of GI at the Medical College of Wisconsin. Dr. Demling brought along his brightest trainee, Dr Meinhard Classen, and we became very good friends. We participated together in several endoscopy meetings in Europe, which was followed by an endoscopy course in Milwaukee in the early 70s. He then spent several weeks with me teaching me the skills and disciplines needed to perform ERCP and endoscopic sphincterotomy. His generous time and patience launched my medical career. We collaborated in developing a successful leadership and financial growth of WGO, as well as, the foundation of the International Digestive Cancer Alliance, which focused on digestive cancer. Dr. Classen was a brilliant man. He was gentle, kind, patient, a gifted educator, and mentor. His talents reached many global physicians, ensuring that they would be able to administer care to patients requiring diagnosis and care. The medical world has lost a gifted physician and man. I am truly grateful for his mentorship, and I will miss his smile, wit, kindness, and his friendship. We have all been blessed to have known Meinhard.

– Joseph E. Geenen, M.D., WGO Treasurer (1990 - 2005)

On behalf of myself, pioneering in colonoscopy and its teaching, but also on behalf of my contemporaries in the UK National Health Service, I would like to record Meinhard’s unfailing generosity of spirit and practical assistance to us and others less fortunate and skilled than himself. When at Erlangen with his mentor Ludwig Demling, he hosted crowds of us to show how GI Endoscopy could be organized and performed, then carrying over the same welcoming attitudes and activities to his model unit in Munich. He was always charming and approachable, a true example to us all - and at the highest level, which is rare.

– Professor Christopher Williams (London, UK)

Dear Colleagues,

I met Professor Meinhard Classen in 1978 with Dr. Geenen in Milwaukee, at a time when only a handful of us were doing ERCPs and Sphincterotomies in the USA. Dr. Classen invited me to his University in Frankfurt, to further my interest in this field. I stayed with him for several weeks and during that time he was a cordial and humorous mentor. He encouraged me to join the European
GI societies, the World Congress of Gastroenterology and to become an international ambassador to teach others in the world the field of gastroenterology. I have continued to take his legacy of teaching the teacher and the student to advance physicians in my homeland, India and the United States.

A funny memory I have with Dr. Classen - In Frankfurt, he showed me a 100 year old sigmoidoscopy chair and then proceeded to put me in the chair and flip me upside down. I had no idea about the chair's capabilities nor of Dr. Classen's silly sense of humor.

A few years later, he met my wife and nurse and asked that he be photographed with them, as they are “more beautiful than me”. I am truly grateful for his work and leadership. He will be missed dearly by me and the gastroenterology communities throughout the world. I send my thoughts and prayers to his family and loved ones.

– Dr. Mysore R Nagaraja (Los Angeles, California)

I was heartbroken to hear the very sad news of my friend and colleague. I became aware of Meinhard’s pioneering achievements in the biliary area long before I met him and then I later became closely involved with him personally. His personal and professional attributes became immediately apparent to me. I quickly got to know him as an outstanding physician, a skilled endoscopist, a superb clinical investigator, a dynamic educator and a world class leader. And with all these wonderful qualities came charm and a kind and generous human being. I had the great privilege and delight to have worked with Meinhard in the WGO and IDCA and in countless other professional activities. And more importantly to be counted among his friends.

I, like so many others, will miss him greatly. My thoughts are with his family.

– Dr. Sidney Winawer (New York, USA)

Dear Colleagues,

It is my honor to be able to address you and speak before the gastroenterology community, to pay tribute to the memory of Prof. Meinhard Classen. I had the opportunity on multiple occasions to hear him give his lectures at the World Congresses of Gastroenterology, which I have attended since the 1990s. The year that I took the Presidency of the Mexican Association of Gastrointestinal Endoscopy, I also attended the American Gastroenterological Association (AGA) Congress in San Francisco, CA, USA, where I had the pleasure of greeting Prof. Classen. From 1991 to 1993, I was Vice President of the Inter-American Society of Digestive Endoscopy, with an area of influence in my country, Central America and the Caribbean. Four years later, a document that filled me with joy and satisfaction came to my house. It was a letter from Prof. Classen, inviting me to participate on the WGO Board of Directors as a member. Due to my institutional activities and work commitments, I had to decline the invitation. I thanked him for his kind invitation, a decline, which I now regret. Although, it was impossible for me to accept at the time, I keep this very nice gesture and attention, to which the honorable teacher Prof. Meinhard Classen had distinguished me.

For 33 years, I was a teacher of multiple generations of doctors in endoscopic training at the Oncology Hospital of the National Medical Center and the wisdom and advice of Prof. Classen and many other teachers, were our professional and academic guides. For this reason, I join in the feelings of the World Gastroenterology Organisation, for the sensitive and irreparable loss of our colleague.

– Dr. Héctor Bermúdez Ruiz (Mexico)
38th Annual General Meeting / Scientific Meeting of The Hong Kong Society of Gastroenterology

On 7 March 2019 The Hong Kong Society of Gastroenterology held its annual Scientific Meeting at Cordis Hong Kong at Langham Place in Kowloon. The meeting was very successful, being well-attended by 185 healthcare professionals. Special thanks must be given to our Organizing Chairperson, Dr. Wai-Fan Luk.

The Society bestowed an honorary fellowship upon our distinguished guest, Professor Richard M. Peek, Jr., Director of Division of Gastroenterology at Vanderbilt University Medical Center in Nashville, Tennessee, USA, who serves as well as the Editor-in-Chief of Gastroenterology. He is among the 22 honorary fellows of our Society who are renowned scholars in the specialty.

Prof. Peek delivered a lecture on “Helicobacter pylori and gastric cancer: A case of tragic triangulations” which was informative and well received. It was followed by “A case of dilated small bowel” presented by Dr. Aston T.C. Tam. The panel discussion was led by Drs. Kelvin K.C. Ng, Chi-Wai Lau and Wai-Kay Seto.

The Annual General Meeting then followed and was attended by 73 fellows and members. The Society’s annual report and financial statements for the year of 2018 were presented during this session. Seven fellows were elected to the Council for the term of 2019-2021. A Certificate of Appreciation was presented to each of the twelve sponsors in appreciation of their support and contributions towards the meeting. Most participants then stayed for the dinner and continued exchanging their views.

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The World Health Organization (WHO) celebrated November 2019 as stomach cancer awareness month. The theme’s purpose is to create mass awareness for this dreadful disease which has now become third most common cause of cancer death. This was accomplished by organizing events in form of health talks, rallies, the distribution of purple-colored periwinkle awareness products (T-shirts, ribbons, hats) and the use of social media.

We at the Department of Medical Gastroenterology at Stanley Medical College and Hospital in Chennai, India also participated in this WHO initiative. Cancer of stomach has increasing prevalence in our society. Early diagnosis and prompt initiation of therapy reduces mortality.

Keeping this spirit in mind we organized this program at our institute. We incorporated the purple color theme and the logo for cancer awareness by using it in the posters, placards, and attire for the participating staff.

The event started with an awareness rally by hospital staff including the Dean, Hospital Outpatient Department (HOD), other faculty from the Department of Medical Gastroenterology, plus students and nursing staff. The rally started from the main administrative block. Passing through the emergency services, OPD blocks and part of public place, it finally concluded at the medical college auditorium.

This was followed by an awareness talk by HOD, Dept. of Medical Gastroenterology and Hepatology, given to general public and hospital healthcare staff. The talk was given in the local language to ensure maximum outreach to general public.

The highlight of the event was a documentary made under guidance of HOD, Dept. of Medical Gastroenterology. It emphasized the fact that negligence of symptoms can lead to delay in diagnosis and further complications. The documentary has been made available on YouTube for mass education at this link: https://youtu.be/LyFYChKrPBI.

The color purple was adopted for theme, posters, placards and attire.
2019 World Hepatitis Day Celebrated in Cities Across Nigeria

Olusegun Isaac Alatise, FWACS
Secretary General
Society for Gastroenterology and Hepatology in Nigeria (SOGHIN)

World Hepatitis Day 2019 was celebrated across the nation of Nigeria. The event kicked off on Friday 26th July and continued almost on a daily basis through August and September. The events were very robust and lively as the momentum and their impact have become stronger as the years roll on. There is no doubt at all that the awareness is improving progressively, judging from the participation by communities completely outside of the major capital cities. This year’s theme was “Invest in Eliminating Hepatitis; Find the Missing Millions.” In the forefront of organization for the events, the Society for Gastroenterology and Hepatology in Nigeria (SOGHIN), through local coordinators, State Chapters and individual members, was able to achieve the following:

1. Free screenings;
2. HBV and HCV vaccinations;
3. Lectures on viral hepatitis, health walk and talk;
4. Awareness campaign and hospital education;
5. Talks with translations in the languages Igbo, Yoruba and Pidgin;
6. Radio and television programs.

Throughout the country, from Nnewi, Damaturu, Keffi, Ido-Ekiti, Oghara, National Hosp Asokoro, Ado Ekiti, Sagamu, PH, Enugu, Lagos, Ibadan, Uyo, Abeokuta, Warri, Ikeja, Ifako-Ijaiye, Benin, Kano, Gombe (Kaltungo LG), Ibadan, Ile-Ife, Jos and many other cities, the voice of SOGHIN members as they mark this day was the clarion call for governments to take action by various steps aimed at investing in eliminating Hepatitis and finding the missing millions.

Major appreciation must be given to SOGHIN’s corporate members and companies like Phillips, Mega Life, Healthline Pharmaceutical Company for their wonderful support for the activities.
Single Topic Conference of the Philippine Society of Gastroenterology

The first Single Topic Conference (STC) of the Philippine Society of Gastroenterology (PSG) for 2019 was held on July 20 at the Crowne Plaza Hotel in Manila. Entitled “Food for the Gut: A Guide for the Gastroenterologists”, the conference was held to answer the growing need of the GI Community on the importance of delivering good nutrition in the holistic treatment of patients.

It was attended by 154 enthusiastic doctors, all of whom were looking for more knowledge in medical clinical nutrition. Despite the rains and thunderstorms from the previous days, the conference hall was filled to its capacity. All topics were well received by the attendees.

The symposia lectures were also well appreciated by the participants. PSG thanked Fresenius Kabi and Mylan Philippines for the generous support extended to the STC.

With the dedication and hard work of the Organizing Committee, composed of the new Diplomates and Fellows of the Society, the entire conference went out smoothly. Meals and snacks were provided and a raffle draw was held at the end of the conference.
The International Association of Pancreatolo"gY Congress 2019 (IAP) & ASSA SAGES 2019 Congress -- Delegates perspective

Gasim Ibrahim Gasim, MD
Fellow in Training
Chris Hani Baragwanath Hospital, University of the Witwatersrand

Wamda Abuelhassan, MD
Fellow in Training
Chris Hani Baragwanath Hospital, University of the Witwatersrand

The South African Gastroenterology Society (SAGES) conference is an annual event held around the second or third week of August in different cities in South Africa on a rotational basis. It is a place where almost all South African gastroenterology trainees and gastroenterologists converge for a multitude of reasons. Apart from the usual well-packed scientific programs, one gets to meet friends from around the “Rainbow Country” and neighboring countries as well, connect with new ones and visit different cities, sparing some time for tourism in beautiful South Africa.

2019’s SAGES conference was not to be missed. It was held in Cape Town from 16-20 August in association with the International Association of Pancreatolo"gY Congress 2019 (IAP) and Association of Surgeons of South Africa (ASSA) at the Cape Town International Convention Center. It was an opportunity to bring advances in gastroenterology and pancreaticobiliary under one roof and we were fortunate enough to be able to attend it each in our own capacity as gastroenterology fellows and as a couple. While both of us mainly concentrated on the SAGES part of the conference, several joint sessions brought us together with colleagues from other societies. The conferences’ robust scientific programs started on the 16th of August with the post graduate course after the welcoming session. After previous successes of the Gastro Foundation (GFSSA) in bringing international societies’ meetings down to Africa (including EASL, ESGE, etc.), we were ecstatic to be part of the event.
ASGE, etc.), this time the postgraduate course was organized by GFSSA/AASLD. This course was the highlight of the conference for us as it showcased the most recent advances in the field of hepatology bringing to us the best of the AASLD liver meeting.

On Saturday the 17th of August, the main academic program started with presentations from the different societies. Professor Radu Tuduians’ eponymous lecture “investigating the patient with esophageal symptoms in 2019,” which summarized the Lyon consensus, was a practice-changing eye-opener in this regard.

The second conference day ended with presentations of abstracts and free papers that mostly showed South African research. The “Shades of gray in diagnosing gastroesophageal reflux disease” was discussed during the evening Gastro Foundation Twilight symposium, which further consolidated the understanding of the Lyons consensus.

The next day started early with continuation of the abstract presentations which were focused on liver research. We also presented a medal-winning abstract in this session. Professor Jay Hoofnagle took us through an interesting fifty year journey of hepatitis B with emphasis on gray cases where decisions differed. Professor Mashiko Setschedi gave an elegant talk about IBS. The most interesting talk during the second day was Professor Axel Dignass entitled “ECCO guidelines: Where I do / do not follow them,” where he reminded us that patients are individuals and they might not always follow the book. The Abbvie symposium, “The bigger picture,” during the evening of the second day addressed different variable presentations of IBD and related conditions and highlighted approaches to these cases.

Monday the 19th was the last day for us at SAGES. Inflammatory bowel diseases lectures by experts, Profs. Tim Raine and Axel Dignass, were appealing and informative, providing the most recent advances in the field in an engaging manner.

Moving away from academics, the conference was a great chance for us to grow our network and to strengthen the connections that we already had. It was great to spend quality time with friends and colleagues when we had engagements about the ways we are committed to improving our gastroenterology practice, collaborate in research or further our training.

With great enthusiasm we await next year’s SAGES conference to renew this energy. This energy is key in helping us persist in gastroenterology. We wish to thank SAGES and the WGO for the opportunity to attend this congress.
With over 13,000 attendees from 122 countries, UEG Week Barcelona 2019 was a truly record-breaking event. Over the course of five days, experts from across the globe met to discuss the most exciting developments in the digestive health field, enjoying a stimulating programme that included a variety of symposia and session types catering to all attendees and their diverse specialities. With an additional 4,200 people tuning in via UEG Week Live, UEG Week lived up to its reputation as the most prestigious digestive health meeting in the world.

Herbert Tilg, Chair of the UEG Scientific Committee, commented: “UEG Week is a truly iconic international meeting that attracts people from all corners of the globe. I believe we generated a hugely exciting programme and sincerely hope that attendees engaged in invigorating debates and enjoyed the latest science.”

Postgraduate Teaching Program
The Congress began with the Postgraduate Teaching Program (PGT), which covered year 3 of the 3-year rolling curriculum, enabling learners to select sessions most relevant to their personal need, with a host of subjects delivered using a variety of interactive teaching methods.

Commenting on the remarkable growth of the programme, former UEG President Paul Fockens said: “The PGT is becoming a huge, huge success. At this year’s meeting we had more than 4,000 people registered for the course, with numbers growing year on year. So, something is going well!”

Of particular note were the sessions centred around inflammatory bowel disease (IBD), with this year’s curriculum focusing on how to use drugs and how to monitor disease activity. Delegates who attended the session ‘How to use drugs in IBD’ enjoyed a lively session with presentations from IBD experts who addressed issues ranging from the role of therapeutic drug monitoring (TDM) in managing IBD patients, to how to position the available drugs in ulcerative colitis (UC) and Crohn’s disease (CD), how to use drugs before and after surgery in CD and how to optimise medical treatment over the course of the disease. A further session ‘Monitoring disease activity in IBD’ reviewed why it is essential to monitor disease activity and examined different monitoring techniques and their challenges in clinical practice.

Young GI Network
An exciting and evolving part of UEG Week, the Young GI Network at UEG Week, organised by the UEG Young Talent Group (YTG), is dedicated to supporting congress delegates below the age of 40 by providing the opportunity to obtain guidance from mentors and network with peers and senior experts.

Young gastroenterologists were treated to a variety of carefully crafted sessions during the congress programme, which included CV tips and tricks from experts, advice on submitting an impressive scientific paper and how fellowships and grants can help build a career in gastroenterology.
The networking event ‘Let’s meet’ also provided another exclusive opportunity for young delegates to meet colleagues from all over the world in an informal atmosphere, allowing attendees to swap advice and form new collaborations.

**UEG Week Barcelona 2019 Awards**

**UEG Research Prize**
UEG awards €100,000 each year for excellence in basic science, translational or clinical research. The prize is awarded to well-established researchers at the height of their active career, whose science has had, or will have, a crucial impact on digestive health.

This year, Silvio Danese was awarded the distinguished UEG Research Prize for his outstanding project “The gut virome as a trigger for IBD: from metagenomics to pathogenesis.” His research aimed to further investigate how the microbiota may affect IBD pathogenesis, with a focus on the virome as a possible trigger for intestinal inflammation.

**UEG Lifetime Achievement Award**
Peter Malfertheiner was awarded the renowned UEG Lifetime Achievement Award 2019, who has had a career spanning more than 40 years and is widely acknowledged by the community of gastroenterologists in Europe. Under his Chairmanship, the Department of Gastroenterology and Hepatology in Magdeburg, Germany, became a thriving institution in gastroenterology. He is also widely recognised for work on *H. pylori*, which led him to become one of the world’s leading experts in this area. Presently, he coordinates research projects related to *H. pylori*, gut microbiota and hepatocellular cancer.

**Top Abstract Prize Awardees**
Every year €10,000 is awarded to each of the top five abstracts submitted to UEG Week. The top five abstracts from 2019 were selected based on their scientific merit, and cover a range of clinical and basic science topics, including the treatment of CD and irritable bowel syndrome (IBS), cancer risk in primary sclerosing chol-

**Journal Best Paper Award**
The UEG Journal Best Paper Award was presented to Liat Gutin, as the first author of the winning article titled “Fecal microbiota transplant for Crohn’s disease: a study evaluating safety, efficacy, and microbiome profile.”

**UEG Rising Stars**
Each year, the UEG Scientific Committee and National Societies Committee jointly select 6-8 emerging clinical scientists as Rising Stars. This year’s winners were: Thomas Bird, Johan Burisch, Sarwa Darwish Murad, Ihsan Ekin Demir, Sheraz Markar, Jean Charles Nault, María Jesús Perugorria, Thomas Reiberger.

**Congress recording - UEG Week 24/7 and Congress TV**
The congress experience continues. UEG Week 24/7 features all core scientific lectures from the week, whilst UEG Week Congress TV contains expert interviews from the leading figures in digestive health: [https://www.ueg.eu/education/ueg-week-24-7/ueg-week-247/](https://www.ueg.eu/education/ueg-week-24-7/ueg-week-247/)

Please join us for another exciting week of scientific advances and updates from the world’s leading experts in digestive health at UEG Week 2020 in Amsterdam, held between October 10-14, 2020!
UEG Week Amsterdam 2020
October 10-14, 2020, RAI Amsterdam

Axel Dignass, UEG President, discusses why he is looking forward to UEG Week Amsterdam 2020, which promises to be one of the year’s leading digestive health meetings.

With over 13,000 participants from 122 countries in attendance in 2019, UEG Week is one of the world’s largest and most prestigious digestive health meetings. This year, UEG Week will take place in the wonderful city of Amsterdam – the first time the Dutch capital will host the congress since 2012.

This year’s programme, which is carefully pieced together by our Scientific Committee, will feature a variety of exciting topics within the fields of gastroenterology, hepatology, endoscopy, digestive surgery and nutrition. A range of interactive session types will showcase the very best science in our field, ensuring the delivery of a first-class, multidisciplinary programme inclusive to all attendees, no matter their level of experience.

Highlights will include the exciting ‘Today’s Science, Tomorrow’s Medicine’ initiative, with this year’s theme on ‘Innovative Technologies Driving Future Medicines’, and the UEG Week Hotspot, which will feature the meeting’s most controversial sessions and hottest debates.

We’ve expanded the case-based programme for 2020, where situations and specific problems experienced in daily clinical routines will be debated and discussed by experts of all fields. We all learn and grow from our mistakes, so it’s worth noting the popular ‘Mistakes in…’ sessions. Based on the successful UEG article series, we’ve added two additional sessions for 2020 to ensure the series appeals to a wider range of delegates.

All of the leading companies in the field of gastroenterology are present at UEG Week, so delegates can also benefit from attending industry sessions throughout the congress programme.

Practical-minded delegates can visit the UEG Week Hands-on areas to increase their knowledge of diagnostic and therapeutic techniques, including surgical training, ultrasonography and endoscopy. Incorporating a range of educational formats, these sessions provide a unique opportunity for attendees to watch, learn and perfect their technique under the supervision of some of the world’s leading specialists.

Submitting an abstract to UEG Week is a unique opportunity to make your scientific achievements visible to a large audience who share your interest in digestive health. There are a number of sessions dedicated to presenting original research, from oral presentations to e-Posters, and Top Abstract Prizes are awarded to the meeting’s five best abstracts submissions, with each awardee receiving €10,000 for use on future research.

Hard work, dedication and exceptional research will, as always, be acknowledged at UEG Week with the inaugural presentations of a series of awards, including the UEG Lifetime Achievement Award, the Journal Best Paper Award and the UEG Research Prize.

We’re expecting an exciting week of scientific advances and updates from the world’s leading experts in digestive health and I am thoroughly looking forward to welcoming new and returning delegates to UEG Week Amsterdam 2020.

Find out more: ueg.eu/week
WGO has a library of 26 Global Guidelines, which are written from a viewpoint of global applicability. Each Guideline goes through a rigorous process of authoring, editing, and peer review, and is as evidence based as possible. WGO is the only organization whose guidelines have adopted a global focus. Each WGO guideline is available in English, French, Mandarin, Portuguese, Russian and Spanish and is updated as new information and evidence is discovered.

New Translations in Mandarin

Translation of the new Pancreatic Cystic Lesions Guideline and recently updated Endoscope Disinfection Guideline are now completed in Mandarin. The Pancreatic Cystic Lesions Guideline aims at providing physicians worldwide with a reasonable, up-to-date approach in the management of pancreatic cystic lesions. Since pertinent diagnostic and therapeutic resources are not uniformly available in different areas of the world, these guidelines are meant to be used as appropriate keeping in mind the local resources and patient preferences.

The Endoscope Disinfection Guideline is intended for use by health providers and professionals who are involved in the use, cleaning, and maintenance of endoscopes, and it aims to support national societies, official bodies, and individual endoscopy departments in developing local standards and protocols for reprocessing endoscopes.

... and Portuguese and Spanish

The Endoscope Disinfection Guideline has also been published in Portuguese and Spanish.

The new translations are all available at

Calendar of Events

Due to uncertainties of scheduling from the COVID-19 situation, please check the WGO Meetings and Events Calendar for the latest updates at https://www.worldgastroenterology.org/meetings-and-events/meetings-and-events-calendar

### WGO RELATED EVENTS

- **When:** May 29, 2020
- **Location:** Worldwide events
- **Organizer:** WGO and WGO Member Societies
- **Website:** [https://www.worldgastroenterology.org/wgo-foundation/wdhd/wdhd-2020](https://www.worldgastroenterology.org/wgo-foundation/wdhd/wdhd-2020)

#### Gastro 2020 Prague
- **When:** December 3-5, 2020
- **Location:** Prague, Czech Republic
- **Organizers:** WGO and the Czech Society of Gastroenterology
- **Website:** [www.gastro2020prague.org](http://www.gastro2020prague.org)

#### World Congress of Gastroenterology 2021
- **When:** December 12-15, 2021
- **Location:** Dubai, United Arab Emirates
- **Organizers:** WGO and the Emirates Gastroenterology and Hepatology Society
- **Website:** [http://wcog2021.org/](http://wcog2021.org/)

### CALENDAR OF EVENTS

#### Ukrainian World Digestive Health Day
- **When:** June 11 - 15, 2020
- **Location:** Kyiv, Ukraine
- **Organizer:** Ukrainian Gastroenterological Association
- **Email:** nina@worldservice.ua

#### International Symposium on Viral Hepatitis and Liver Disease (ISVHLD)
- **When:** June 18 - 21, 2020
- **Location:** Taipei International Convention Center, Taipei, Taiwan
- **Organizers:** ISVHLD / GHS and the Taiwan Association for the Study of the Liver
- **Website:** [ghs2020taipie.com](http://ghs2020taipie.com)

#### 3rd Annual Conference of the Egyptian Association for Research and Training in Hepato-Gastroenterology (EARTH 2020)
- **When:** June 25 - 26, 2020
- **Location:** Grand Nile Tower, Cairo, Egypt
- **Organizer:** EARTH
- **Website:** [http://www.earth-eg.org](http://www.earth-eg.org)

#### The Digital International Liver Congress 2020 (ILC)
- **When:** August 25 - 28, 2020
- **Location:** On-line
- **Organizer:** EASL
- **Website:** [https://ilc-congress.eu/](https://ilc-congress.eu/)

#### Gastro Update Europe 2020
- **When:** September 4 - 5, 2020
- **Location:** Crowne Plaza Bratislava, Hodzovo Namestie 2, Bratislava, Slovakia
- **Organizer:** MedUpdate Europe
- **Email:** info@medupdate-europe.com
- **Website:** [www.gastro-update-europe.eu](http://www.gastro-update-europe.eu)

#### WGO-ENDORSED EVENT

#### Congress of the Association of Gastroenterologists and Hepatologists in Bosnia and Herzegovina
- **When:** September 10, 2020
- **Location:** Cultural Centre Banski Dvor, Banja Luka, Bosnia and Herzegovina
- **Organizer:** Association of Gastroenterologists and Hepatologists in Bosnia and Herzegovina
- **Website:** [http://www.geha.ba/](http://www.geha.ba/)

#### World Congress for Esophageal Diseases
- **When:** September 21 - 23, 2020
- **Location:** Toronto, Ontario, Canada
- **Organizer:** International Society for Diseases of the Esophagus
- **Website:** [https://isde2020.com](https://isde2020.com)

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**WGO Member Societies Submit Your Event**

Are you a WGO Member Society wanting to share your event with WGO readers? Visit [http://www.worldgastroenterology.org/forms/submit-event.php](http://www.worldgastroenterology.org/forms/submit-event.php) to submit your event for publication in WGO’s website conference calendar as well as the quarterly e-WGN calendar of events!
TDDW 2020 - Taiwan Digestive Disease Week 2020  
**When:** September 25 - 27, 2020  
**Location:** Taipei, Taiwan  
**Organizer:** The Gastroenterological Society of Taiwan  
**Email:** tddw@tddw.org  
**Website:** www.tddw.org

AEG 23rd Annual Meeting  
**When:** November 5 - 6, 2020  
**Location:** Madrid, Spain  
**Organizer:** Asociación Española de Gastroenterología (AEG)  
**Website:** www.aegastro.es

European Lifestyle Medicine Congress  
**When:** November 13 - 15, 2020  
**Location:** Crowne Plaza Athens City Centre  
**Website:** https://www.crman.gr/microsites/1200

Portuguese Digestive Week 2020  
**When:** November 23 - 26, 2020  
**Location:** Centro de Congressos do Algarve  
**Email:** geral@spg.pt  
**Website:** www.semanadigestiva.pt

XII Curso Internacional de Otoño AGA-SAGE  
**When:** November 30 - December 1, 2020  
**Location:** Universidad Católica Argentina - Aula Magna  
**Email:** Sagesecretaria@gmail.com  
**Website:** https://sage.org.ar/evento/xii-curso-internacional-de-otono-agasage/2020-05-15/

Asian Pacific Digestive Week 2020  
**When:** December 7 - 10, 2020  
**Location:** Kuala Lumpur Convention Centre  
**Kuala Lumpur, Malaysia**  
**Organizers:** Asian Pacific Association of Gastroenterology and Malaysia Society of Gastroenterology & Hepatology  
**Website:** http://www.apdw2020.org/

APASL 2021  
**When:** February 3 - 6, 2021  
**Location:** Bangkok, Thailand  
**Organizer:** Asian Pacific Association for the Study of the Liver  
**Website:** apasl2021bangkok.org

ALEH 2021  
**When:** May 12 - 15, 2021  
**Location:** Rio de Janeiro, Brazil  
**Organizer:** Latin American Association for the Study of the Liver (ALEH)  
**Website:** https://alehlatam.org

JDDW 2021 - Japan Digestive Disease Week 2021  
**When:** November 4 - 7, 2021  
**Location:** Kobe, Japan  
**Organizer:** Organization of JDDW  
**Website:** http://www.jddw.jp/english/index.html

JDDW 2022 - Japan Digestive Disease Week 2022  
**When:** October 27 - 30, 2022  
**Location:** Fukuoka, Japan  
**Organizer:** Organization of JDDW  
**Website:** http://www.jddw.jp/english/index.html