

## **11<sup>th</sup> Annual IBD Interest Group Meeting: Cape Town 2018**

The idyllic Vineyard Hotel, with its beautiful backdrop of Table Mountain, played host to the 11<sup>th</sup> Gastroenterology Foundation of Sub-Saharan Africa Inflammatory Bowel Disease [IBD] Interest Group Meeting held on 27 October 2018. The meeting was well attended by local Capetonian gastroenterologists and others with an interest in IBD.

Professor Tariq Iqbal – a consultant gastroenterologist from the University of Birmingham, as invited speaker, provided us with some insights into his experiences using parenteral iron replacement therapy in anaemic IBD patients. In addition to sharing his experiences with iron metabolism and iron replacement therapy, Professor Iqbal also discussed his experiences using faecal microbial transplantation to successfully bring about remission in a cohort of his IBD patients.

Professor Gill Watermeyer delivered a state of the art lecture on Immune Checkpoint Inhibitor [ICI] Colitis – a phenomenon that may well be finding its way to the gastroenterologist's door in the near future. Immune checkpoint inhibitors are now being used in the management of metastatic malignancy. These drugs have many side-effects, one of which being colitis. ICI colitis resembles IBD in many respects, from clinical presentation to endoscopic findings. ICI colitis will need to be managed by a gastroenterologist, who will now form part of the multi-disciplinary team looking after such patients.

The world has an aging population, and the South African IBD population is no different. Professor Watermeyer, in her second lecture, discussed the management of IBD in the elderly patient. She divided these patients into patients who have pre-existing IBD and have now grown older versus patients who have been diagnosed with IBD in their later years of life. IBD in the elderly poses many challenges to the gastroenterologist – ranging from differing disease phenotypes, disease severity and side-effects to treatment. In addition, it requires the treating gastroenterologist to be flexible in his or her treatment approaches [aggressive management vs. conservative management] towards managing the elderly patient with IBD.

The extra-intestinal manifestations [EIM] of IBD can be vast and complex. Professor Mashiko Setshedi, in her lecture, provided an in depth, systematic approach to EIM's of IBD. She used the opportunity to highlight that; whilst IBD may be a disease that originates from within the GIT, it is a multisystem disease that requires a multisystem approach to management.

Superman has kryptonite, the rand has the dollar and Crohn's disease has intestinal tuberculosis. This formed the basis of the last two talks at the IBD interest group meeting. Dr. Nnete Mokhele, in his debut talk as the most recently qualified South African gastroenterologist, shared a case study of a patient who presented to Groote Schuur Hospital with a lower GI bleed which manifested as a result of a large small bowel ulcer. Biopsies of the lesion confirmed intestinal tuberculosis (ITB). Dr. Khalid Coovadia also presented a case of a young patient living in a rural area who presented with unexplained weight loss and diarrhoea. This patient, had she walked to Tygerberg hospital, would have arrived there within 11 hours, however presented to Tygerberg hospital 334 days later, having previously been diagnosed with colon carcinoma and Crohn's disease along the way. However after repeat evaluation, a diagnosis of intestinal tuberculosis was made at. Both patients showed remarkable improvement after anti-tuberculous therapy was initiated. Lessons learned and shared from both cases include the importance of having an approach to ulcerating lesions of the

GIT, and that in endemic areas; ITB should be at the top of the differential diagnosis. In addition to that, biopsy specimens of ulcerating lesions in the TI and caecum MUST be sent of TB MCS and PCR testing.

A special thanks to the Gastroenterology Foundation of SSA and sponsors (Abbvie, Adcock Ingram, Equity, Ferring, Janssen, Litha, Takeda) for supporting the meeting and bringing lectures from the 2018 United European Gastroenterology Week to Cape Town's doorstep. These state of the art lectures were much appreciated by the audience.

We look forward to next year's IBD Interest Group Meeting.

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