



## PRESIDENT'S REPORT

**Douglas A. Drossman, MD**  
*President, Rome Foundation*  
*Senior Editor, Rome III Book*

It's been an enjoyable and productive year for the Rome Foundation and I'm pleased to share with you our efforts to help energize the field of functional GI Disorders. Our activities have focused on some infrastructure changes as well as newer educational initiatives, along with a globalization of our efforts.

First, I'm pleased to announce that Dr. William D. Chey at the University of Michigan has joined our Foundation Board. Bill is a well recognized investigator and educator in the FGIDs particularly IBS, FD and newer pharmacological treatments. We are thrilled he has agreed to join us particularly since he has just begun as co-editor of the American Journal of Gastroenterology. Bill will be replacing Enrico Corazziari (Italy) who was one of the initiators and leaders of Rome activities for over 20 years, when the Delphi method (now the working team process) first began. Enrico will continue with the Foundation as a member of the International Liaison Committee. In addition, Ms Carlar Blackman our administrative coordinator for 15 years has moved on to pursue other career goals and has been replaced by Michele Pickard. Michele has extensive experience as a senior administrator and program coordinator. Welcome Michele!

We thank Dr. Lin Chang (USA), for her coordination of our educational activities. In 2009 we published two reports on brain imaging (1) and the psychometric evaluation of clinical outcomes (2), and we have just formed a new working team on the role of intestinal microbiota in FGIDs, chaired by Dr. Magnus Simren (Sweden). We would like to invite you to attend our 3rd Annual Rome Foundation – AGA Lectureship on Tuesday May 4 from 10:30 to 11:30 AM in room 391/392 at the Morial Convention Center. Dr. Erwin G. Zoetendal (Netherlands) will speak on “*Understanding Gut Microbiota: A New Era in Gastroenterology*”. This is one of the more promising research areas within the field of FGIDs and we look forward to hearing Dr. Zoetendahl's insights. Also, please visit our website at [www.theromefoundation.org](http://www.theromefoundation.org) to learn about other educational programs, and we would like to thank the American Gastroenterology Association for their recent endorsement of our comprehensive Computer Based Learning Program.

In the April issue of *The American Journal of Gastroenterology*, we launched the “*Rome Foundation Diagnostic Algorithms for Common Gastrointestinal Symptoms*”, a 2-year multinational effort of over a dozen experts who have come together to produce a unique diagnostic educational product. Please read the report from John Kellow MD (Australia), who served as project coordinator and editor.

We continue to help young clinicians and investigators through our fellowship program and to support research initiatives. Please see

Dr. Bill Whitehead's article on the awardees for our research grants, fellowship and best research paper award. One of our major future goals is to increase our ability to fund good research in the FGIDs.

The last year has been one of global expansion of our mission and goals. Many thanks go to Dr. Max Schmulson (Mexico) chair of the International Liaison Committee for his leadership and facilitation. Currently, Dr. Schmulson is coordinating two Rome symposia at the October, 2010 Pan American Meeting in Guayaquil, Ecuador. Because of increasing requests internationally for educational materials, we are also pleased that Dr. Ami Sperber (Israel) has taken on the responsibility to coordinate the translation of all of our documents and products. Dr. Sperber has published on the method of translating research instruments, and he has developed the guidelines for our educational materials as well. Information on obtaining non-English educational or research items as well as information on conducting translations to other languages are available on the website. Finally, we are also pleased to announce that the Rome Foundation and the World Gastroenterology Organization (WGO) are organizing a conference: “*IBS – The Global Perspective: Prevalence, Pathophysiology, Presentation and Management*” which will be held April 6-7, 2011 in Milwaukee just before the 9th International Functional GI Disorders Symposium. The conference is being co-coordinated by Drs. Ami Sperber (Israel - Rome Foundation) and Eamonn Quigley (Ireland – WGO).

We are thankful to so many of you who support our efforts. Please visit our booth (#1347) in the exhibitors' area at DDW in New Orleans!

### Reference List

- 1) Mayer EA, Aziz Q, Coen S, Kern M, Labus J, Lane R, et al. Brain imaging approaches to the study of functional GI disorders: A Rome working team report. *Neurogastroenterol Motil* 2009;21:579-96.
- 2) Spiegel B, Camilleri M, Bolus R, Andresen V, Chey W, Fehnel S, et al. Psychometric evaluation of endpoints in IBS randomized controlled trials: A Rome foundation working group report. *Gastroenterol* 2009 Dec;137(6):1944-53.

### OUR MISSION IS:

**“TO IMPROVE THE LIVES OF PEOPLE WITH  
FUNCTIONAL GI DISORDERS.”**

To accomplish this we have defined two goals:

- Promote clinical recognition and legitimization of the FGIDs
- Develop a scientific understanding of their pathophysiological mechanisms to achieve optimal treatment.



## ROME FOUNDATION EDUCATIONAL PROGRAM

**Lin Chang, MD**  
*Chair, Education Committee*

There are a number of exciting educational programs that the Rome Foundation has been developing. These include the Rome educational slide sets on FGIDs, the diagnostic algorithms, and the annual Rome-AGA lectureship at Digestive Diseases Week (DDW).

**Rome educational slide sets.**

There are two new exciting updates this past year: the new brain imaging module and an updated irritable bowel syndrome (IBS) treatment section. Brain imaging is one of the most novel and cutting edge tools we have incorporated into the field of FGIDs in order to understand the central mechanisms underlying brain-gut disorders such as IBS. A new brain imaging module provides beautiful images with information about the different neuroimaging techniques and data from studies comparing brain activation patterns in patients with FGIDs and healthy controls. In addition, the IBS treatment section has been updated to incorporate the 2009 American College of Gastroenterology (ACG) Functional GI Disorders Task Force evidence-based recommendations on the diagnostic evaluation and treatment of IBS.

**Diagnostic algorithms for common gastrointestinal symptoms.**

The Rome Foundation has developed standardized algorithms to diagnose frequent upper and lower gastrointestinal (GI) symptoms that patients commonly present with when they see

their gastroenterologists and other health care providers. These algorithms were designed to provide a practical and cost-effective approach to evaluating and diagnosing common GI complaints including dysphagia, abdominal pain, diarrhea and constipation. Distinguished experts and authors of the Rome III book have designed these algorithms based on information provided in the Rome book. They have supplemented the algorithms with patient cases and commentary to help providers effectively use the algorithms in clinical practice. In collaboration with *The American Journal of Gastroenterology*, these diagnostic algorithms will be published in the April issue of the journal.

**Rome-AGA lectureship at the DDW.**

The Third Annual Rome-AGA lectureship will be presented by Dr. Erwin Zoetendel at this year’s DDW meeting. Dr. Zoetendel is an Assistant Professor in the Agrotechnology and Food Sciences Laboratory of Microbiology at Wageningen University, the Netherlands, and was selected by the Rome Board because of his cutting edge work in the field of microbiota in the GI tract. His lecture is entitled, “Understanding Gut Microbiota: A New Era in Gastroenterology.” He will provide an overview of GI microbiota diversity and discuss culture-independent approaches to study microbiota diversity in relation to health and disease with a focus on their potential role in functional gastrointestinal disorders. Dr. Zoetendel’s lecture will take place on Tuesday, May 4, 2010 at 10:30am.

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## SUMMARY OF THE ROME ENDPOINTS AND OUTCOMES IN FGID MEETING

April 15-16, 2009

As a follow-up on the 1998 Rome Foundation consensus conference in Vienna where a consensus was developed on patient-reported outcomes (PROs) in functional gastrointestinal disorders (FGIDs), the Rome Foundation organized and hosted the **Endpoints and Outcomes Conference 2009: Optimizing Clinical Trials in FGIDs** on April 15-16, 2009. This forum brought together professional organizations, pharmaceutical companies, and regulatory agencies to develop a consensus around outcome measures and related topics that would help assure success in clinical trials and drug development. The objectives of the conference were to: 1) critically review the validity of end points used to evaluate treatment efficacy in clinical trials, 2) discuss the role of severity, risk-benefit assessment, biomarkers, health-related quality of life (HRQOL), and psychological symptoms on outcome, 3) discuss the development of meaningful and valid end points and the role of the FDA's critical path initiative, and 4) provide a forum to



discuss drug development and regulation amongst industry and regulatory agencies. A concise review of the Rome Endpoints and Outcomes meeting will be published in the April thematic issue of the *American Journal of Gastroenterology*.

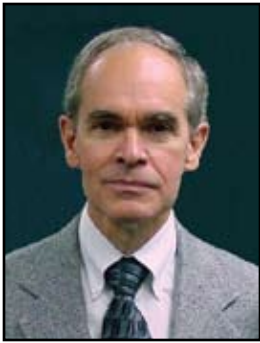
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## PRO CONSORTIUM AND IBS WORKING GROUP

For symptom-based disorders including functional gastrointestinal disorders (FGIDs), there is an urgent need for validated patient reported outcome (PRO) measures that can be used to assess treatment response in clinical trials. There are currently no PROs for IBS or other functional gastrointestinal disorders that are accepted by the Food and Drug Administration (FDA). In an effort to improve the speed and safety of new drug development, the FDA supported the formation of the PRO Consortium, which is a public and private partnership that will develop adequate PRO instruments for use in medical product development, regulatory decisions, and labeling claims. The PRO Consortium is comprised of representatives from Critical Path Institute (C-Path), which serves as the neutral ground administrator, FDA, and other stakeholders including industry and academic groups. IBS was one of the medication conditions for which working groups were formed to develop PROs for clinical trials. Representatives from academic groups including the Rome Foundation and the International Foundation for Functional Gastrointestinal Disorders (IFFGD) are non-voting participants on the the IBS working group.

Over the past year, the IBS working group continues to work on the development of an IBS primary endpoint. The working group consists of representatives from industry, academia, a patient organization. The IBS group has been working with the GI and SEALD groups within the FDA on this development process.

On March 23, 2010, the First Annual Patient-Reported Outcomes Consortium Workshop took place in Bethesda, Maryland. The workshop was co-sponsored by C-Path and the FDA. The objectives of the workshop were to: 1) explore the role of PRO endpoints in the evaluation of medical products, 2) discuss two FDA guidance documents relevant to PRO instrument development and use, 3) describe the role of the PRO Consortium, 4) review progress made by the PRO Consortium's working groups, and 5) discuss future directions of the PRO Consortium. Members of C-Path, FDA, and European Medicines Agency (EMA), and industry representatives on the working groups spoke at the workshop. An overview of the meeting and slides from the presentations are available on the C-Path's website at [www.c-path.org](http://www.c-path.org).



## REPORT OF THE RESEARCH COMMITTEE

**William E. Whitehead, PhD**  
*Chair, Research Committee*

### Rome Foundation Research Awards

The Rome Foundation provides a \$50,000 research grant each year to a young investigator. Preference is given to applications that (1) test the validity and/or utility of the Rome III diagnostic criteria, (2) assess the epidemiology of functional GI and motility disorders, or (3) advance knowledge of outcome assessment or trial design for FGID treatment trials. The applications receive a NIH-style review by an independent review committee. This year the review committee was chaired by Dr. Brooks Cash, Associate Professor and Chief of the Gastroenterology Section at the Uniformed Services University for the Health Sciences.

### Ray Clouse Prize for the Best Research Article on Functional Gastrointestinal and Motility Disorders

In 2008 the Rome Foundation created an award in memory of Ray E. Clouse, MD, a gastroenterologist and scholar at Washington University School of Medicine and a devoted member of the Rome Foundation. This award recognizes the author of the best original research paper published in the functional gastrointestinal and motility disorders between one DDW and the next. Anyone may submit a nomination by briefly describing how the paper will impact

the field of functional gastroenterology and motility along with a pdf of the paper. For 2010 these the submitted papers were reviewed by two experienced journal editors: Nicholas Talley, MD, Chief of Medicine at the Mayo Clinic in Jacksonville, Florida, Professor of Medicine at the Mayo Clinic in Rochester, and former editor of the American Journal of Gastroenterology; and (2) Robin Spiller, MD, Professor of Medicine and Chief of the Gastroenterology Division at the University of Nottingham, and former editor of *Gut*.

### Rome Foundation Career Development Award (fellowship) in Functional GI and Motility Disorders.

An important goal of the Rome Foundation is to support and encourage gastroenterology fellows to make a career in the area of functional GI and motility. With the assistance of an educational grant from Takeda Pharmaceuticals we began in 2009 to offer one year fellowships to three outstanding gastroenterology fellows each year. In 2010, an independent review committee consisting of (1) Brennan Spiegel, MD, who is an Assistant Professor of Medicine at UCLA; and (2) Peter Whorwell, MD, who is Professor of Medicine at the University of Manchester in the UK, judged the applications.

## WE ARE PLEASED TO ANNOUNCE THE WINNERS OF THE 2010 AWARDS

These awards will be acknowledged at the Rome Foundation Reception on May 1st at the Hilton Riverside in New Orleans

### 2010 RESEARCH GRANT RECIPIENT

#### Javier Santos Vicente M.D., Ph.D.

Hospital Vall d'Hebron

Servicio de Digestivo e Institut de Recerca

*Topic: Role of mucosal eosinophils in the physiopathology of intestinal inflammation in irritable bowel syndrome*

### 2010 RAY CLOUSE RECIPIENT

#### Hanneke Beaumont MD, PhD

Academic Medical Center

Department of Gastroenterology and Hepatology

Amsterdam, The Netherlands

*Title: The position of the acid pocket as a major risk factor for acidic reflux in healthy subjects and patients with GORD*

*Gut* 2010;59:441-451 doi:10.1136/gut.2009.178061

### 2010 FELLOWSHIP RECIPIENTS

#### Emily Tucker MD

Nottingham Digestive Diseases Centre

*Topic: Assessment of gastric motor and sensory function to a large test meal by gamma scintigraphy, magnetic resonance imaging and a nutrient drink test in health and patients with functional dyspepsia*

#### Aldona Dlugosz MD

Karolinska Institutet

*Topic: Aetiopathogenetic mechanisms in gastrointestinal motility disorders*

#### Carlos Hernandez MD

Hospital General Vall d'Hebron

Barcelona, SPAIN

*Topic: To determine the role of the thorax in abdominal distension, and the response to behavioral treatment by biofeedback*

### Previous recipients of the Rome Foundation Research Award

#### 2008 Recipient

Madhulika Varma, MD

*Comprehensive validation of the Rome III constipation module.*

#### 2009 Recipient (see page 5)

Miranda van Tilburg, PhD

*Validation of the child/ adolescent Rome III Criteria University of North Carolina*

### Previous recipients of the Ray Clouse Prize

#### 2008 Recipient

Krisztina Gecse, PhD

*Increased fecal serine-protease activity in diarrheic IBS patients: a colonic luminal factor impairing colonic permeability and sensitivity*  
*Gut* 2008;57:591-9

#### 2009 Recipients (see page 6-7)

Anurag Agrawal, PhD

*Bloating and distension in irritable bowel syndrome: the role of visceral sensation*  
*Gastroenterology* 2008;134:1882-9 2009

John E. Pandolfina, MD

*Achalasia: a new clinically relevant classification by high-resolution manometry*  
*Gastroenterology* 2008;135:1526-33

## COMPETITIVE RESEARCH AWARD 2009 ROME FOUNDATION RESEARCH GRANT

The Rome Foundation established a Research Committee in January 2007, chaired by William Whitehead and Enrico Corazziari. The Research committee is responsible for developing guidelines, overseeing the process, and monitoring progress of research grants awarded by the Foundation. One or more awards of up to \$50,000 will be given annually. Preference will be given to applications that (1) test the validity and/or utility of the Rome III diagnostic criteria, (2) assess the epidemiology of functional GI and motility disorders, or (3) advance knowledge of outcome assessment or trial design for FGID treatment trials. In 2008, the first award was given to Dr. Madhulika Varma for her work on "Comprehensive validation of the Rome III constipation module". In 2009, the Rome Foundation was pleased to give this award to Dr. Miranda van Tilburg for her work on "Validation of the Child/Adolescent Rome III Criteria".



### Validation of the Child/Adolescent Rome II Criteria

**Principal Investigator: Miranda Van Tilburg, PhD**  
Assistant Professor of Medicine  
University of North Carolina

Dr. van Tilburg is an assistant professor of medicine at the UNC Center for Functional GI & Motility in the Division of Gastroenterology and Hepatology at the University of North Carolina at Chapel Hill. She received her Master's degree in Economic Psychology and her PhD in Health Psychology at Tilburg University, The Netherlands. In 2001, she completed a three-year postdoctoral fellowship in Endocrinology and Medical Psychology at Duke University Medical Center. For her work she was awarded the 2007 Pediatric Junior Investigator Award of the International Foundation for Functional Gastrointestinal Disorders (IFFGD) and a 2008 IFFGD Research Grant.

**Background:** Establishment of symptom-based criteria for pediatric functional gastrointestinal disorders (FGID) by the Rome committee in 1999 considerably advanced the diagnosis and study of children who suffer from functional gastrointestinal symptoms. The Rome criteria have been helpful in distinguishing subgroups of children with FGIDs and a handful of studies have shown initial validation of these criteria in a pediatric population but several problems were identified as well. The new Rome III criteria aimed to resolve most of these problems.

**Aims:** Functional gastrointestinal disorders are very common in children with about 17% of children suffering from abdominal pain of functional origin or constipation. Development of the Rome criteria to diagnose functional gastrointestinal disorders in children and adolescents has been of great importance to research and clinical practice. Some problems with the Rome II criteria have been identified. Perhaps the most significant finding was that up to one third of children with a physician diagnosis of functional abdominal pain do not meet Rome criteria. The Rome committee has revised the criteria recently to be more inclusive and to adjust several other problems that were identified. There is currently no data that shows if the Rome III criteria identify more children with a functional gastrointestinal disorder.

The aim of the present study is to validate the Rome III criteria in a population of children with functional gastrointestinal disorders:

- Aim #1: Validate the Rome III criteria against physician diagnosis and daily diaries. Because of the expected low rates of some Rome III disorders the study will only be powered to validate the most common child/adolescent disorders including Functional Dyspepsia, Irritable Bowel Syndrome and Functional Constipation. Data on other disorders will be collected to yield descriptive data.
- Aim #2: Assess the stability of the Rome III diagnoses, (test-retest reliability)
- Aim #3: Determine concordance between parent-child report.

**Methods:** We plan to recruit 105 children between the ages of 4 and 18 years old and their primary caregiver who present at the pediatric gastroenterology clinics at UNC hospitals and Duke University Medical Center for gastrointestinal symptoms. Caregivers and children age 10 and up will complete the Questionnaire on Pediatric Gastrointestinal Symptoms (QPGS) while in the clinic. Half the families will be asked to complete the QPGS 2 weeks later while the other half will be asked to complete daily diaries. Physician diagnoses will be retrieved from the medical records. We will assess test-retest reliability and determine concordance between caregiver-child report. We will validate the questionnaire against daily diaries and physician diagnosis. An exploratory aim will be to review if caregiver-child disagreement is due to inaccuracies in caregiver report of stool symptoms (non-observable behavior) and/or child report of pain (non saliency). We will also explore whether child or caregiver recall of pain and stool pattern is most accurate at different ages.

## RAY CLOUSE AWARD FOR RESEARCH PUBLICATION IN FUNCTIONAL GI AND MOTILITY DISORDERS



**Ray E. Clouse, MD**

*The Rome Foundation established an award in memory of Ray E. Clouse, MD a gastroenterologist and scholar at Washington University School of Medicine and a devoted member of the Rome Foundation. Ray's academic career spanned 27 years of research, teachings and writings that has left an indelible mark in the field of functional GI and motility disorders and of gastroenterology in general.*

*In 2008, the first award was given to Dr. Krisztina Gecse for her paper, "Increased fecal serine-protease activity in diarrheic ibs patients: a colonic luminal factor impairing colonic permeability and sensitivity". In 2009 the Rome Foundation is pleased to offer two awards. One goes to Dr. Anurag Agrawal for his paper titled Bloating and distention in irritable bowel syndrome: The role of visceral sensation. The second award goes to Dr. John Pandolfino for his paper titled Achalasia: A new clinically relevant classification by high-resolution manometry.*



### PUBLISHED RESEARCH AWARDEE

#### **Anurag Agrawal, MD, MRCP**

*Consultant Gastroenterologist  
Doncaster Royal Infirmary  
South Yorkshire, UK*

*Bloating and distention in irritable bowel syndrome: The role of visceral sensation.*

Dr. Agrawal has had a particular interest in Irritable Bowel Syndrome and related conditions and he has been involved with physiological and clinical research as part of his fellowship training. He carried out this research as a fellow in the Neurogastroenterology Unit in the University of Manchester, UK. He has coauthored several original publications, reviews and book chapters, and has presented at major national and international conferences.

Agrawal A, Houghton LA, Lea R, Morris J, Reilly B, Whorwell PJ. Bloating and distention in irritable bowel syndrome: The role of visceral sensation. *Gastroenterology* 2008;134:1882-1889.

**Background & Aims:** Abdominal bloating is an extremely intrusive symptom of irritable bowel syndrome (IBS) that is not always accompanied by an increase in abdominal girth (distention), raising the possibility that these 2 features of the condition may not share a common pathophysiology. A number of mechanisms have been postulated for bloating and distention, but the role of visceral sensation, which is often abnormal in IBS, has not been previously investigated, and this study aimed to address this question.

**Methods:** Abdominal girth measured by ambulatory abdominal inductance plethysmography and bloating severity was recorded over 24 hours in 39 IBS-constipation (ages, 18–73 years) and 29 IBS-diarrhea patients (ages, 20–59 years) meeting Rome II criteria. Within 1 week, rectal sensory thresholds were assessed with a barostat using the ascending method of limits and tracking. Results: IBS patients who suffered with bloating alone had lower

thresholds for pain ( $P = .005$ ), desire to defecate ( $P = .044$ ), and first sensation ( $P = .07$ ) compared with those who had concomitant distention irrespective of bowel habit. When patients were grouped according to sensory threshold, hyposensitive individuals had distention significantly more than those with hypersensitivity ( $P = .001$ ), and this was observed more in the constipation subgroup. Static and dynamic compliance did not differ among any of the groups.

**Conclusions:** The symptom of bloating alone is associated with visceral hypersensitivity, suggesting that the pathogenesis of bloating and distention may not be the same. Consequently, treatment approaches may have to be different, and measuring visceral sensation could have utility in choosing the right therapeutic modality.



## PUBLISHED RESEARCH AWARDEE

### John E. Pandolfino, MD

Associate Professor  
Division of Gastroenterology  
Northwestern University  
Chicago, IL, USA

#### *Achalasia: A new clinically relevant classification by high-resolution manometry*

Dr John E. Pandolfino is an Associate Professor, Division of Gastroenterology at Northwestern University. He received his M.D. from Loyola University Stritch School of Medicine, completed residency training in internal medicine and fellowship training in gastroenterology at Northwestern Memorial Hospital. Dr Pandolfino has recently received a Master's degree in clinical investigation from Northwestern University.

Pandolfino JE, Kwiatek MA, Nealis , Bulsiewicz W, Post J, Kahrilas PJ. Achalasia: A new clinically relevant classification by high-resolution manometry. *Gastroenterology* 2008;135:1526-33.

**Background & Aims:** Although the diagnosis of achalasia hinges on demonstrating impaired esophagogastric junction (EGJ) relaxation and aperistalsis, 3 distinct patterns of aperistalsis are discernable with high-resolution manometry (HRM). This study aimed to compare the clinical characteristics and treatment response of these 3 subtypes.

**Methods:** One thousand clinical HRM studies were reviewed, and 213 patients with impaired EGJ relaxation were identified. These were categorized into 4 groups: achalasia with minimal esophageal pressurization (type I, classic), achalasia with esophageal compression (type II), achalasia with spasm (type III), and functional obstruction with some preserved peristalsis. Clinical and manometric variables including treatment response were compared among the 3 achalasia subtypes. Logistic regression analysis was performed using treatment success as the dichotomous dependent variable controlling for independent manometric and clinical variables.

**Results:** Ninety-nine patients were newly diagnosed with achalasia (21 type I, 49 type II, 29 type III), and 83 of these had sufficient follow-up to analyze treatment response. Type II patients were significantly more likely to respond to any therapy (Bo-Tox [71%], pneumatic dilation [91%], or Heller myotomy [100%]) than type I (56% overall) or type III (29% overall) patients. Logistic regression analysis found type II to be a predictor of positive treatment response, whereas type III and pretreatment esophageal dilatation were predictive of negative treatment response.

**Conclusions:** Achalasia can be categorized into 3 subtypes that are distinct in terms of their responsiveness to medical or surgical therapies. Utilizing these subclassifications would likely strengthen future prospective studies of treatment efficacy in achalasia.

## IFFGD is Seeking Applications for 2011 Research Awards

*Due date for submitting applications Friday, October 22, 2010*

IFFGD is seeking applications and nominations for research awards. The awards will be given to active investigators in six categories who have a record of research interest in basic mechanisms or clinical aspects of functional gastrointestinal and motility disorders, and neurogastroenterology. These awards of \$7,500 each are intended to encourage the participation of clinicians and scientists in multidisciplinary efforts aimed at advancing the understanding of these basic mechanisms and clinical aspects in adults and in children.

The individuals selected for awards will be recognized at IFFGD's 9th International Symposium for Functional GI Disorders to be held in Milwaukee, WI on April 8-10, 2011.

The deadline for receipt of applications is **October 22, 2011**.

For details go to our web page at:

[www.giresearch.org/site/gi-research/iffgd-research-awards](http://www.giresearch.org/site/gi-research/iffgd-research-awards)

## 2009 ROME FOUNDATION CAREER DEVELOPMENT AWARDS: FELLOWSHIPS IN FUNCTIONAL GI AND MOTILITY DISORDERS

There is a large unmet need for training in functional GI and motility disorders. The Rome Foundation plans to address this concern by initiating a program of career development awards. We will provide three fellowships each year for clinical and research training in Functional Gastroenterology and Motility Disorders (FGIMD).

The overall goal is to encourage physicians in gastroenterology fellowship training to make commitments to careers in research and clinical teaching in this area. The fellowship program will be administered by the Rome Foundation. Fellowships will include salary support for 75% protected time for one year with a maximum of \$75,000 salary support including indirect costs (social security,

health insurance, malpractice insurance, and \$2,000 per year allocated for attendance at Digestive Disease Week and one other conference – either Neurogastroenterology or ACG).

Applications will be accepted from individuals who are already accepted into a clinical fellowship training program. Applications should include a plan for mentored clinical training in FGIMD, a plan for mentored research training, and a specific research proposal. Acceptable areas for research training and research proposals are limited to clinical and translational research using human subjects or human tissue, epidemiological research, or outcomes research that addresses functional gastrointestinal or motility disorders.

### **The 2009 Rome Foundation Fellows are Aldona Dlugosz, MD, Punit Jhaveri, MD and Emidio Scarpellini, MD.**



#### **Aldona Dlugosz, MD**

*Postgraduate Fellow*

*Centre for Medical and Surgical Gastroenterology and Hepatology  
Karolinska University Hospital, Huddinge, Sweden*

Dr. Dlugosz graduated from the Faculty of Medicine at Pomeranian Medical Academy (PAM), Szczecin, Poland in 1987. She began working in the Department Gastroenterology and Internal Medicine PAM in 1988 and was qualified as Specialist in Internal Medicine 1997 and in Gastroenterology in 2004. In 1997,

she defended her MD thesis “Immunocytochemical Evaluation of Gastric Mucosal Cathepsin D in Peptic Ulcer”. In 2001, Dr. Dlugosz moved to Sweden and started to work at the Centre for Medical and Surgical Gastroenterology and Hepatology at Karolinska University Hospital, Stockholm. In 2006 she joined the Motility Team and started postgraduate training/PhD program in gastrointestinal motility.



#### **Punit Jhaveri, MD**

*Fellow, Pediatric Gastroenterology and Nutrition*

*Johns Hopkins Children's Center  
Baltimore, MD, USA*

Dr. Jhaveri first became interested in functional disorders while working with Dr. Darbari at the Johns Hopkins and Kennedy Krieger Institute pediatric GI Motility Center. As a first year postdoctoral fellow, Punit attended the

ANMS meeting in Atlanta, which further solidified his interest in

the field of dysmotility. As a second year, Punit was awarded the NASPGHAN travel grant to attend the Gut Microbiome course. Thereafter, he was awarded the ANMS Visiting Scholar Grant, where he completed his rotation at the Nationwide Children's Hospital in Columbus, Ohio under Dr. Di Lorenzo and Dr. Mousa. He plans to study functional abdominal pain and orthostatic intolerance in adolescents.



#### **Emidio Scarpellini, MD**

*Internal Medicine Resident*

*Department of Internal Medicine  
Gemelli Hospital, Rome, Italy*

Dr. Scarpellini received his MD degree at the Gemelli Hospital School of Medicine in 2004 where he is currently a Internal Medicine resident. He has

been Neurogastroenterological fellow at Gasthuisberg University Hospital, Leuven, in the last year, under the guide of Prof J. Tack. The Rome Foundation Fellowship will make it possible for him to become a Gastroenterology Fellow.

*The Rome Foundation gratefully acknowledges the generous support of  
Takeda Pharmaceuticals North America, Inc. and Sucampo Pharmaceuticals, Inc. who made these Fellowships possible.*



**WE ARE PLEASED TO PROVIDE FOR YOU IN THIS AND FUTURE ISSUES ARTICLES THAT HAVE BEEN PUBLISHED THAT HIGHLIGHT THE ROME CRITERIA.**

- 1: Rey E, Locke GR 3rd, Jung HK, Malhotra A, Choung RS, Beebe TJ, Schleck CD, Zinsmeister AR, Talley NJ. Measurement of abdominal symptoms by validated questionnaire: a three month recall time frame as recommended by Rome III is not superior to a one year recall time frame. *Aliment Pharmacol Ther.* 2010 Mar 6. [Epub ahead of print] PubMed PMID: 20222912.
- 2: Flagstad G, Helgeland H, Markestad T. Faecal calprotectin concentrations in children with functional gastrointestinal disorders diagnosed according to the Pediatric Rome III criteria. *Acta Paediatr.* 2010 Mar 5. [Epub ahead of print] PubMed PMID: 20219041.
- 3: Camilleri M. Do the Symptom-Based, Rome Criteria of Irritable Bowel Syndrome Lead to Better Diagnosis and Treatment Outcomes? The Con Argument. *Clin Gastroenterol Hepatol.* 2010 Feb;8(2):129. Epub 2009 Oct 20. PubMed PMID: 20182528; PubMed Central PMCID: PMC2822078.
- 4: Spiller R, Camilleri M, Longstreth GF. Do the symptom-based, rome criteria of irritable bowel syndrome lead to better diagnosis and treatment outcomes? *Clin Gastroenterol Hepatol.* 2010 Feb;8(2):125-9; discussion 129-36. PubMed PMID: 20152787.
- 5: Primavera G, Amoroso B, Barresi A, Belvedere L, D'Andrea C, Ferrara D, Cascio AL, Rizzari S, Sanfilippo E, Spataro A, Zangara D, Magazzu G. Clinical utility of Rome criteria managing functional gastrointestinal disorders in pediatric primary care. *Pediatrics.* 2010 Jan;125(1):e155-61. Epub 2009 Dec 14. PubMed PMID: 20008416.
- 6: Ke MY, Zhao W. [Application of Rome III diagnostic criteria on functional gastrointestinal disorders]. *Zhonghua Yi Xue Za Zhi.* 2009 Apr 14;89(14):937-8. Chinese. PubMed PMID: 19671300.
- 7: Dorn SD, Morris CB, Hu Y, Toner BB, Diamant N, Whitehead WE, Bangdiwala SI, Drossman DA. Irritable bowel syndrome subtypes defined by Rome II and Rome III criteria are similar. *J Clin Gastroenterol.* 2009 Mar;43(3):214-20. PubMed PMID: 19623100.
- 8: Hsu YC, Liou JM, Liao SC, Yang TH, Wu HT, Hsu WL, Lin HJ, Wang HP, Wu MS. Psychopathology and personality trait in subgroups of functional dyspepsia based on Rome III criteria. *Am J Gastroenterol.* 2009 Oct;104(10):2534-42. Epub 2009 Jun 16. PubMed PMID: 19532128.
- 9: Helgeland H, Flagstad G, Grøtta J, Vandvik PO, Kristensen H, Markestad T. Diagnosing pediatric functional abdominal pain in children (4-15 years old) according to the Rome III Criteria: results from a Norwegian prospective study. *J Pediatr Gastroenterol Nutr.* 2009 Sep;49(3):309-15. PubMed PMID: 19525874.
- 10: Gómez Alvarez DF, Morales Vargas JG, Rojas Medina LM, Mújica Oviedo SC, Camacho López PA, Rueda Jaimes GE. [Prevalence of irritable bowel syndrome and associated factors according to the Rome III diagnostic criteria in a general population in Colombia]. *Gastroenterol Hepatol.* 2009 Jun-Jul;32(6):395-400. Epub 2009 Jun 10. Spanish. PubMed PMID: 19520461.
- 11: Yacob D, Di Lorenzo C. Functional abdominal pain: all roads lead to Rome (criteria). *Pediatr Ann.* 2009 May;38(5):253-8. Review. PubMed PMID: 19476297.
- 12: Shulman ST. Back to Rome (criteria). *Pediatr Ann.* 2009 May;38(5):239-40. PubMed PMID: 19476293.
- 13: Aro P, Talley NJ, Ronkainen J, Storskrubb T, Vieth M, Johansson SE, Bolling-Sternevald E, Agréus L. Anxiety is associated with uninvestigated and functional dyspepsia (Rome III criteria) in a Swedish population-based study. *Gastroenterology.* 2009 Jul;137(1):94-100. Epub 2009 Mar 26. PubMed PMID: 19328797.
- 14: Lee KJ, Kwon HC, Cheong JY, Cho SW. Demographic, clinical, and psychological characteristics of the heartburn groups classified using the Rome III criteria and factors associated with the responsiveness to proton pump inhibitors in the gastroesophageal reflux disease group. *Digestion.* 2009;79(3):131-6. Epub 2009 Mar 23. PubMed PMID: 19307735.
- 15: Buonavolontà R, Boccia G, Turco R, Quitadamo P, Russo D, Staiano A. [Pediatric functional gastrointestinal disorders: a questionnaire on pediatric gastrointestinal symptoms based on Rome III criteria]. *Minerva Pediatr.* 2009 Feb;61(1):67-91. Review. Italian. PubMed PMID: 19180003.
- 16: Hyman PE. Will the Rome criteria help pediatrics? *J Pediatr Gastroenterol Nutr.* 2008 Nov;47(5):700-3. PubMed PMID: 18955883.
- 17: Wang A, Liao X, Xiong L, Peng S, Xiao Y, Liu S, Hu P, Chen M. The clinical overlap between functional dyspepsia and irritable bowel syndrome based on Rome III criteria. *BMC Gastroenterol.* 2008 Sep 23;8:43. PubMed PMID: 18808723; PubMed Central PMCID: PMC2569040.
- 18: Baber KF, Anderson J, Puzanovova M, Walker LS. Rome II versus Rome III classification of functional gastrointestinal disorders in pediatric chronic abdominal pain. *J Pediatr Gastroenterol Nutr.* 2008 Sep;47(3):299-302. PubMed PMID: 18728525.
- 19: Talley NJ, Ruff K, Jiang X, Jung HK. The Rome III Classification of dyspepsia: will it help research? *Dig Dis.* 2008;26(3):203-9. Epub 2008 May 6. Review. PubMed PMID: 18463436.
- 20: Miwa H. Prevalence of irritable bowel syndrome in Japan: Internet survey using Rome III criteria. *Patient Prefer Adherence.* 2008 Feb 2;2:143-7. PubMed PMID: 19920955; PubMed Central PMCID: PMC2770425.
- 21: Wang AJ, Liao XH, Hu PJ, Liu SC, Xiong LS, Chen MH. [A comparison between Rome III and Rome II criteria in diagnosing irritable bowel syndrome]. *Zhonghua Nei Ke Za Zhi.* 2007 Aug;46(8):644-7. Chinese. PubMed PMID: 17967234.
- 22: Kellow JE. The 'pro' case. The Rome III criteria. *Neurogastroenterol Motil.* 2007 Oct;19(10):787-92. Review. PubMed PMID: 17883429.
- 23: Drossman DA. Introduction. The Rome Foundation and Rome III. *Neurogastroenterol Motil.* 2007 Oct;19(10):783-6. PubMed PMID: 17883428.
- 24: Eersyud A, Posserud I, Abrahamsson H, Simrén M. Subtyping the irritable bowel syndrome by predominant bowel habit: Rome II versus Rome III. *Aliment Pharmacol Ther.* 2007 Sep 15;26(6):953-61. PubMed PMID: 17767480.
- 25: Halder SL, Talley NJ. Functional Dyspepsia: A New Rome III Paradigm. *Curr Treat Options Gastroenterol.* 2007 Aug;10(4):259-72. PubMed PMID: 17761119.
- 26: Zolezzi Francis A. [Functional gastrointestinal diseases and Rome III]. *Rev Gastroenterol Peru.* 2007 Apr-Jun;27(2):177-84. Review. Spanish. PubMed PMID: 17712396.
- 27: Buzás GM. [Functional dyspepsia: the past, the present and the Rome III classification]. *Orv Hetil.* 2007 Aug 19;148(33):1573-9. Review. Hungarian. PubMed PMID: 17686677.
- 28: Fukudo S. [Functional gastrointestinal disorders: Rome III standard and their physiopathology]. *Nippon Naika Gakkai Zasshi.* 2007 Jun 10;96(6):1220-7. Review. Japanese. PubMed PMID: 17608002.

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- 29: Talley NJ. Functional gastrointestinal disorders in 2007 and Rome III: something new, something borrowed, something objective. *Rev Gastroenterol Disord.* 2007 Spring;7(2):97-105. Review. PubMed PMID: 17597677.
- 30: Maratka Z. Comments on Rome criteria of functional gastrointestinal disorders. *Hepatogastroenterology.* 2007 Mar;54(74):454-7. PubMed PMID: 17523297.
- 31: Sperber AD, Shvartzman P, Friger M, Fich A. A comparative reappraisal of the Rome II and Rome III diagnostic criteria: are we getting closer to the 'true' prevalence of irritable bowel syndrome? *Eur J Gastroenterol Hepatol.* 2007 Jun;19(6):441-7. PubMed PMID: 17489053.
- 32: Gwee KA. Irritable bowel syndrome and the Rome III criteria: for better or for worse? *Eur J Gastroenterol Hepatol.* 2007 Jun;19(6):437-9. PubMed PMID: 17489052.
- 33: Hogan WJ. Functional biliary disorders: the Rome III experience. *Curr Gastroenterol Rep.* 2007 Apr;9(2):91. PubMed PMID: 17465080.
- 34: Mearin F. [Irritable bowel syndrome: new Rome III criteria]. *Med Clin (Barc).* 2007 Mar 10;128(9):335-43. Review. Spanish. PubMed PMID: 17376361.
- 35: Rome Foundation. Guidelines--Rome III Diagnostic Criteria for Functional Gastrointestinal Disorders. *J Gastrointestin Liver Dis.* 2006 Sep;15(3):307-12. PubMed PMID: 17203570.
- 36: Drossman DA. Rome III: the new criteria. *Chin J Dig Dis.* 2006;7(4):181-5. Review. PubMed PMID: 17054578.
- 37: Drossman DA, Dumitrascu DL. Rome III: New standard for functional gastrointestinal disorders. *J Gastrointestin Liver Dis.* 2006 Sep;15(3):237-41. Review. PubMed PMID: 17013448.
- 38: Hattori T, Fukudo S. [Use of Rome III criteria for diagnosing irritable bowel syndrome]. *Nippon Rinsho.* 2006 Aug;64(8):1425-8. Review. Japanese. PubMed PMID: 16898606.
- 39: Veereman-Wauters G. The Quest for Light in the Misty Frontierland of Pediatric Functional Gastrointestinal Disorders: Act II: Rome III Criteria. *J Pediatr Gastroenterol Nutr.* 2006 Aug;43(2):156-7. PubMed PMID: 16877977.
- 40: Suzuki H, Nishizawa T, Hibi T. Therapeutic strategies for functional dyspepsia and the introduction of the Rome III classification. *J Gastroenterol.* 2006 Jun;41(6):513-23. Review. PubMed PMID: 16868798.
- 41: Drossman DA. The functional gastrointestinal disorders and the Rome III process. *Gastroenterology.* 2006 Apr;130(5):1377-90. Review. PubMed PMID: 16678553.
- 42: Zuckerman MJ, Nguyen G, Ho H, Nguyen L, Gregory GG. A survey of irritable bowel syndrome in Vietnam using the Rome criteria. *Dig Dis Sci.* 2006 May;51(5):946-51. Epub 2006 May 3. PubMed PMID: 16670940.
- 43: Rowland M, Bourke B, Drumm B. Do the Rome criteria help the doctor or the patient? *J Pediatr Gastroenterol Nutr.* 2005 Sep;41 Suppl 1:S32-3. PubMed PMID: 16131960.
- 44: Taminiau J, Benninga M. Pediatric clinical research will benefit from Rome III. *J Pediatr Gastroenterol Nutr.* 2005 Sep;41 Suppl 1:S30-1. PubMed PMID: 16131959.
- 45: Lu CL, Lang HC, Chang FY, Chen CY, Luo JC, Wang SS, Lee SD. Prevalence and health/social impacts of functional dyspepsia in Taiwan: a study based on the Rome criteria questionnaire survey assisted by endoscopic exclusion among a physical check-up population. *Scand J Gastroenterol.* 2005 Apr;40(4):402-11. PubMed PMID: 16028434.
- 46: Delvaux M, Gay G. [Are the definitions of functional digestive disorders based on the Rome criteria useful in clinical practice?]. *Gastroenterol Clin Biol.* 2004 Jun-Jul;28(6-7 Pt 1):551-3. French. PubMed PMID: 15243387.
- 47: Chiba N. Treat the patients' main dyspepsia complaint, not the ROME criteria. *Am J Gastroenterol.* 2004 Jun;99(6):1059-62. PubMed PMID: 15180725.
- 48: Parfenov AI, Ruchkina IN, Orobei luA, Bykova SV. [Efficacy of the Rome criteria II in diagnosis of irritable bowel syndrome.]. *Ter Arkh.* 2004;76(4):51-4. Russian. PubMed PMID: 15174323.
- 49: Corazziari E. The Rome criteria for functional gastrointestinal disorders: a critical reappraisal. *J Pediatr Gastroenterol Nutr.* 2004 Jun;39 Suppl 3:S754-5. Review. PubMed PMID: 15167376.
- 50: Tibble JA, Sigthorsson G, Foster R, Forgacs I, Bjarnason I. Use of surrogate markers of inflammation and Rome criteria to distinguish organic from nonorganic intestinal disease. *Gastroenterology.* 2002 Aug;123(2):450-60. PubMed PMID: 12145798.
- 51: Alatri G. [The historical museum for teaching of University of Rome III and the archive of the Ente Scuole per i Contadini Dell'agro Romano]. *Med Secoli.* 1998;10(3):531-9. Italian. PubMed PMID: 11623700.
- 52: Corazziari E. New Rome criteria for functional gastrointestinal disorders. *Dig Liver Dis.* 2000 Dec;32 Suppl 3:S233-4. PubMed PMID: 11245305.
- 53: Vanner SJ, Depew WT, Paterson WG, DaCosta LR, Groll AG, Simon JB, Djurfeldt M. Predictive value of the Rome criteria for diagnosing the irritable bowel syndrome. *Am J Gastroenterol.* 1999 Oct;94(10):2912-7. PubMed PMID: 10520844.
- 54: Drossman DA. The Rome criteria process: diagnosis and legitimization of irritable bowel syndrome. *Am J Gastroenterol.* 1999 Oct;94(10):2803-7. PubMed PMID: 10520825.
- 55: Hamm LR, Sorrells SC, Harding JP, Northcutt AR, Heath AT, Kapke GF, Hunt CM, Mangel AW. Additional investigations fail to alter the diagnosis of irritable bowel syndrome in subjects fulfilling the Rome criteria. *Am J Gastroenterol.* 1999 May;94(5):1279-82. PubMed PMID: 10235207.
- 56: Jacobsson LT, Knowler WC, Pillemer S, Hanson RL, Pettitt DJ, McCance DR, Bennett PH. A cross-sectional and longitudinal comparison of the Rome criteria for active rheumatoid arthritis (equivalent to the American College of Rheumatology 1958 criteria) and the American College of Rheumatology 1987 criteria for rheumatoid arthritis. *Arthritis Rheum.* 1994 Oct;37(10):1479-86. PubMed PMID: 7945473.
- 57: D'Arca Simonetti A, Sebastiani L, Bellante G, Pana' A, Borgioli A. [Hygienic status of small streams on the periphery of Rome. III. Research on pathogenic microorganisms]. *Nuovi Ann Ig Microbiol.* 1979 Jul-Aug;29(4):269-85. Italian. PubMed PMID: 233380.
- 58: D'ARCA S. [Epidemiological incidence of trichophytosis in the Province of Rome. III.]. *Nuovi Ann Ig Microbiol.* 1956 Nov-Dec;7(6):469-82. Italian. PubMed PMID: 13419166.

# The Rome Foundation Proudly Presents



the latest educational resources for all health care professionals and patients concerned with functional gastrointestinal disorders (FGIDs)



FREE reprints of this journal issue available at Rome Foundation booth #1347 at DDW 2010, New Orleans.

COMING SOON in October, the clinical algorithms will be available on CD and downloadable in html format for ease of use.

The Rome Foundation is committed to develop and support research and education to help people with Functional GI Disorders.

Learn more about any of our educational materials at: [www.theromefoundation.org](http://www.theromefoundation.org)



Please visit our Rome Foundation booth #1347 at DDW in New Orleans



## CLINICAL ALGORITHMS PROJECT

Diagnostic Algorithms for Common Gastrointestinal Symptoms:  
A new clinical tool from the Rome Foundation

John Kellow, MD  
Chair, Algorithm Committee

In April, The Rome Foundation, in collaboration with *The American Journal of Gastroenterology*, introduced the Foundation's new clinical tool, *Diagnostic Algorithms for Common Gastrointestinal Symptoms*. These standardized algorithms offer a practical, efficient and cost effective aid to diagnose the GI symptoms that patients commonly present to gastroenterologists and primary care providers.

The broad objective of this series of algorithms is to raise clinician awareness of the functional gastrointestinal disorders (FGIDs) and their diagnosis by making the essentials of the Rome III classification more accessible for clinical practice. Starting with common symptoms like abdominal pain and diarrhea, or vomiting, each algorithm takes the reader step by step through branching decisions until a diagnosis is made. The aim is to begin with common symptoms and then 'translate' the Rome III diagnostic criteria for the range of common FGIDs- from the esophageal disorders to the anorectal disorders- into a practical clinical application for gastroenterologists, trainees, and primary care physicians.

Six separate sections, each covering a primary GI region and containing one to four algorithms, are included. The result of a two year collaborative process, each section is written by a pair of acknowledged experts, and combines the best available evidence, where available, with consensus opinion from all the section authors. This initiative, conceived and chaired by John Kellow, MD and co-chaired by Henry Parkman MD, consisted of the following authors for each section: 1) *Esophageal Disorders*: Peter Kahrilas MD, André Smout MD; 2) *Gastroduodenal Disorders*: Jan Tack MD, PhD, Nicholas Talley MD, PhD; 3) *Bowel Disorders*: Robin Spiller MD, W. Grant Thompson MD; 4) *Gallbladder and Sphincter of Oddi Disorders*: Enrico Corazziari MD, Peter Cotton MD; 5) *Anorectal Disorders*: Adil Bharucha MD, Arnold Wald MD; and 6) *Functional Abdominal Pain Syndrome*: Doug Drossman MD, and Ami Sperber MD.



A case history introduces each algorithm, and provides an example of its use in clinical practice. The algorithms are constructed in the standard international recommended format with both action and decision boxes. Extensive notes and references are provided to support the decision tree logic.

Reprints of the series of algorithms from *The American Journal of Gastroenterology* will be available free of charge at the Rome Foundation booth in the exhibit hall at DDW. In addition to the printed version of the algorithms, the Foundation will also have available later in the year CD disks and downloadable programs from the Rome Foundation Website. The Foundation hopes that these algorithms will enhance clinician knowledge and diagnosis of the FGIDs, optimize patient-doctor communication in relation to the FGIDs, and improve clinical outcomes. Clinician feedback on the algorithms is welcomed.

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**AMERICAN JOURNAL OF GASTROENTEROLOGY ISSUE**

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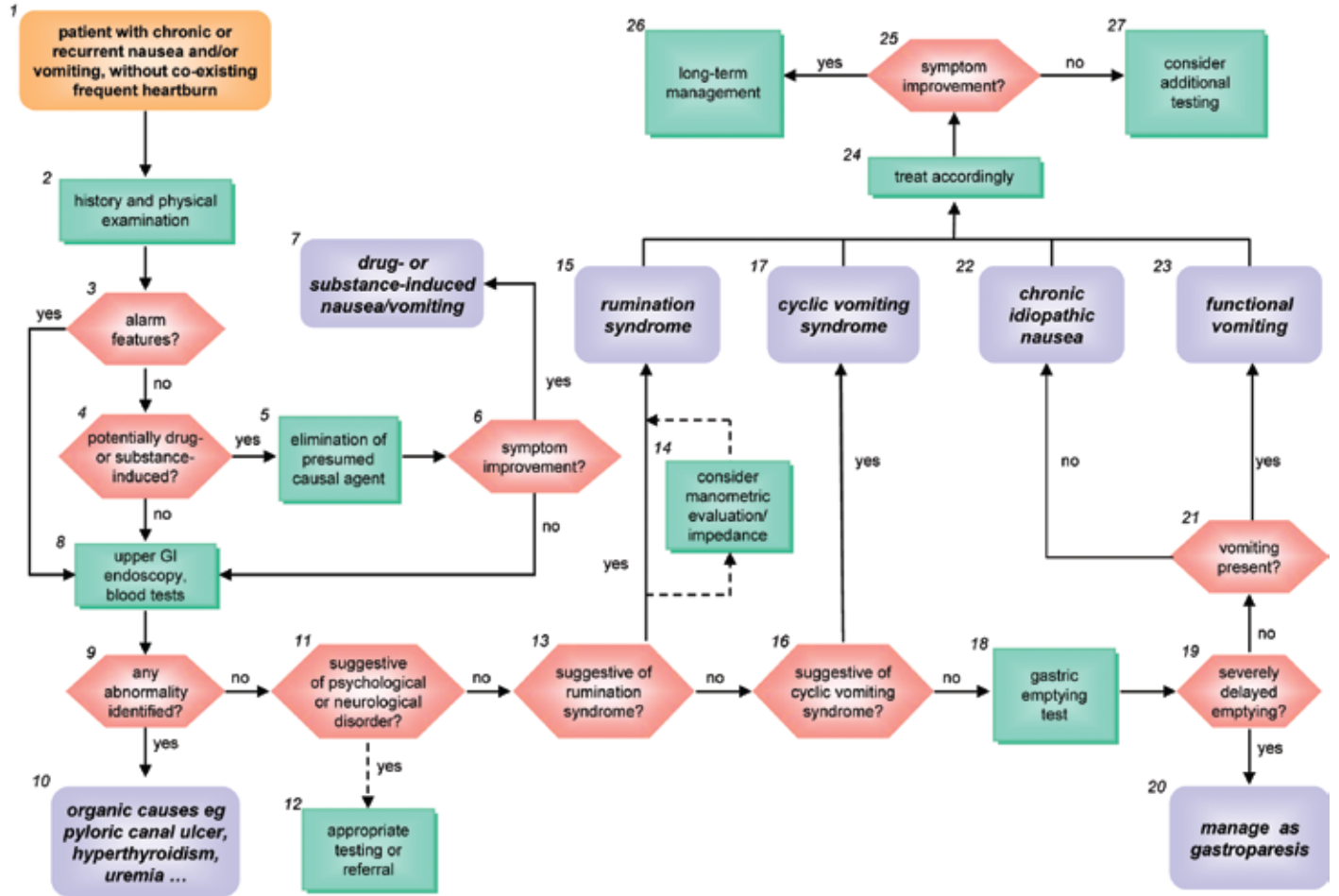
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**Functional Abdominal Pain Syndrome (FAPS)**

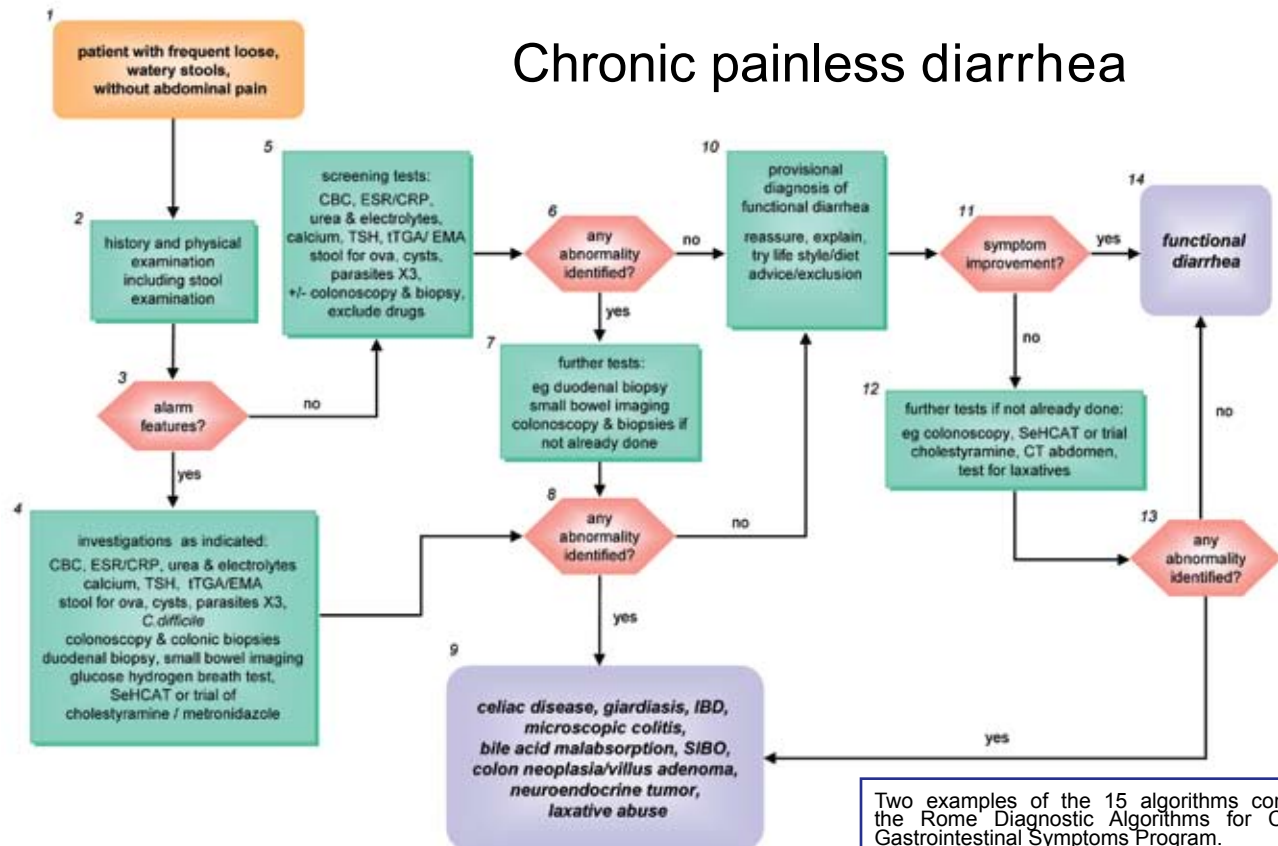
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# Recurrent nausea and/or vomiting



# Chronic painless diarrhea



Two examples of the 15 algorithms comprising the Rome Diagnostic Algorithms for Common Gastrointestinal Symptoms Program.

## INTERNATIONAL LIAISON COMMITTEE (ILC)



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Porto Alegre, Brazil



Shin Fukudo, MD  
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Ami Sperber, MD, MSPH  
Tel Aviv, Israel

It has been a very active year for the ILC, since DDW 2009. We have been working on several aspects including Rome Sponsored Meetings, translations into several languages of the Rome Questionnaires and algorithms. All of the members of our Committee have been doing a great effort in the education on FGID and the Rome criteria in their respective geographical areas of influence by participating and organizing local meetings, writing papers and book chapters.

**Rome in Russia:** I would like to highlight the educational activities in which Dan Dumitrascu has been involved in Russia during the meeting in Moscow by the 10th Congress of the Russian Society of Gastroenterology where there is a growing interest in FGID and the Rome criteria. In addition Enrico Corazziari met with pharmaceutical representatives from Russia and presented information on the use of the Rome criteria.

**Israel:** The Israel Neurogastroenterology Circle, chaired by Ami Sperber, is one of the interest groups affiliated with the Israel Gastroenterology Association. In March 2010 they held a day seminar on "Treatment of IBS" and in April 2010 they will be conducting a day seminar on FGIDs, for fellows in GI. They run a website with information for professionals and patients and the number of entries into the website has been increasing on a regular basis.

**Pan American Congress:** This year, Rome is also sponsoring two symposia at the XXXII Pan American Congress of Digestive Disease that will take place in Guayaquil-Ecuador from September 30th to October 4, 2010. The Rome-sponsored meetings will be on Monday, October 4th, which will be a big day for neurogastroenterology related sessions. The first symposium will be a clinical one and will cover topics such as Epidemiology and Sociocultural Factors of FGID in Latin America, Functional Dyspepsia and Helicobacter pylori, Bacterial Flora and IBS, FGID in Pediatrics and the Multidisciplinary Approach in FGID. This symposium will have speakers such as Douglas Drossman, Lin Chang and Douglas Morgan from the US and Carlos Francisoni, Ernesto Giraldes, Ana Maria Madrid and Laura Sole from Brazil, Chile and Argentina, and will be Chaired by Doug Drossman and Max Schmulson. The second symposium will be an interactive one, presenting clinical cases that will be developed with the audience participation according to the Rome algorithms released in the American Journal of Gastroenterology. We have received great support by Dr. Carlos Ledesma, President of the Congress and we are sure that it will be a successful meeting. For more information about this meeting, please log on [www.socgastro.ec](http://www.socgastro.ec).

**Rome/WGO Cross-Cultural Workshop:** Rome will also sponsor a Cross-cultural workshop at the 2011 IFFGD meeting

in Milwaukee. This session will include topics such as culture and health, cross-cultural competence in clinical practice and research and will discuss the epidemiology of FGID's in Mexico, Central and South America, Japan and Asia and Eastern Europe, finishing with discussions of clinical cases that will highlight issues in cross-cultural practice with speakers that will represent these areas including Ami Sperber, Max Schmulson, Carlos Francisoni, Shin Fukudo and Dan Dumitrascu, and of course Charles Gerson who has been leading cross-cultural research studies in FGIDs.

**Translations:** We proudly announced that the Japanese translation of the Rome III Adult Questionnaire has been finalized and a validation study is on the way. Also, in Brazil, Carlos Francisoni has successfully finalized the translation and validation into Portuguese of the Functional Dyspepsia questions of the Rome III Adult Questionnaire and the publication of this process is on the way. In addition, a multinational Spanish translation and validation has been finalized. This process was done in Mexico, Nicaragua, Guatemala, Chile and Spain with a grant from the Rome Foundation and an abstract will be presented in the 2010 DDW meeting (Morgan D, Squella F, Pena E, Mearin F, Rey E, Enriquez-Blanco H, Cortes L, Dominguez R, Schmulson M. Multinational validation of the Spanish Rome III Adult Diagnostic Questionnaire: Comparable sensitivity and specificity to English instrument. Poster Session-Functional GI Disorders: Epidemiology and Symptoms. May 3rd). Also, the first version of the Italian translation is being currently tested in a pilot study.

The translated questionnaires into different languages will be soon available for research purposes on the Rome's website. In addition, we are collaborating very closely with the Translations Committee to be able to translate into different languages the recently released Rome Clinical Algorithms, so they can be accessible by non-English speaking practitioners that take care of patients with FGID around the world.

**New Member:** Last but not least, we would like to welcome our newest member, Enrico Corazziari. Enrico does not need any introduction. He is one of the earliest members of Rome and everybody will agree if we say that he is one of "Rome's pillars". His presence will help strengthen our activities in Europe.

Send us your comments: The Rome International Liaison Committee is open to any suggestions and requests for collaborations and support. Please send your comments or needs to the member closer to your region or to any Rome member.

Max Schmulson  
Chair-Rome International Liaison Committee  
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## CROSS CULTURAL PROJECT

### Ami D. Sperber, MD, MSPH

The Rome Foundation and the World Gastroenterology Association will be convening jointly an international symposium on "IBS – The Global Perspective". The symposium will be held for 1½ days on April 6-7, 2011 in Milwaukee, Wisconsin, just prior to the 9<sup>th</sup> International Symposium on Functional GI Disorders April 8-10, 2011. Drs. Ami Sperber and

Eamonn Quigley will serve as co-directors and organizers of the symposium.

IBS is a common functional disorder with high reported prevalence rates throughout the world. However, many questions remain unanswered regarding possible similarities and differences among cultural and ethnic groups in relation to prevalence, genetics, environmental factors, symptom reporting, gender distribution, pathophysiology, diagnostic workup, management, treatment compliance and clinical response.

These issues can be best addressed by well-designed multinational cross-cultural studies. The growth in research interest in IBS, taken together with the growing sophistication of communication technology, makes the conduct of these studies a feasible goal.

The primary aim of the symposium is to bring together an international group of clinicians, scientists and researchers with an interest in IBS and other functional GI disorders to foster greater awareness of IBS, and update existing knowledge about the similarities and differences at a global level. This coming together can lead to the development of national and regional programs to enhance clinical skills, improve the quality of multinational clinical trials and research, and establish international research networks.

Another focus of the conference will be on cross-cultural aspects of IBS and other functional GI disorders. Effects of the interaction between culture and health often go unrecognized, yet in clinical

practice they can impact the quality of health care and health outcomes, and in research cause methodological shortcomings that lead to biased conclusions and the inappropriate interpretation of research results.

The development of cross-cultural clinical and research competences will be emphasized. Cross-cultural clinical competence relates to the ability of health care providers to function optimally in the multicultural background of patients in many medical practices, while cross-cultural research competence relates to the skills required to conduct research involving population subgroups of differing cultural and ethnic backgrounds.

The symposium objectives are:

- To foster greater interest in the global aspects of IBS.
- To foster the development of cross-cultural competence in the clinical and research arenas.
- To improve the quality of multinational research
- To foster international research networks for the conduct of cross-cultural, multi-national research on IBS and other functional gastrointestinal disorders
- To increase awareness on the impact of culture on patient care and research in the FGIDs.
- To address cross-cultural issues in the conduct of multinational clinical drug trials
- To facilitate the development of patient reported outcomes measures for FGID clinical research across cultures.

The symposium should be of interest to:

- Practicing gastroenterologists, primary care physicians, psychologists, sociologists, and other health care providers interested in IBS and the functional GI disorders at a global level
- Scientists and academicians interested in cross-cultural investigation of these conditions.
- Pharmaceutical company research, development and marketing managers interested in learning about cultural differences in attitudes and beliefs toward medical treatments
- Members of health policy and regulatory organizations

## ROME TRANSLATION PROJECT

### Ami D. Sperber, MD, MSPH

The Rome Foundation has established a Translation Project to make its material available in as many languages as possible. This reflects the international nature of the foundation.

The project was established with the following objectives in mind:

- 1) To provide educational material such as the Rome book and the clinical algorithms to as large a population as possible.
- 2) To facilitate local and multinational, cross-cultural research as well as clinical drug trials in as many settings and populations as possible by making the Rome diagnostic and psychosocial alarm questionnaires available in multiple languages.

#### Translation guidelines

To accomplish these objectives the Translation Project has prepared and disseminated guidelines for the proper translation of its materials. Adherence to these guidelines is a requisite for obtaining official Rome Foundation approval for its material in other languages than English. The guidelines, in pdf format, are available upon request from Dr. Sperber and will soon be available on a dedicated Rome Foundation website. Rome clinician representatives, fluent in the translation target language, will accompany and monitor the process and make final the recommendation for approval of the translated material.

#### Translation alternatives

In principle there are two ways that material can be translated. The first is by individuals or groups that initiate translations

either by their own personnel or through professional translation services. In these cases the Translation Project accompanies the process and monitors adherence to the guidelines before giving formal approval to the translated material. This alternative has already been used in many cases and has yielded translation of the Rome book and/or questionnaires in languages such as Spanish, Japanese, Korean, Portuguese, Chinese, Malay, German, and Hebrew. An Italian translation process is now in an advanced stage.

The second is by contracting out work by the Rome Foundation itself to professional translation companies. The Rome Foundation has received price quotations from several companies for the questionnaires and clinical algorithms and is expected to begin a pilot with one of the companies in the near future.

#### Licensing and fees

In some cases there will be a licensing contract and/or fees for use of the translated material. John Kellow and Doug Drossman are drawing up the guidelines for these cases, with the help of legal counsel.

#### The Translations Project website

We are near completion of a dedicated home page for the Rome Translation Project as part of the Rome Foundation website. The website will contain links to a pdf file with the translation guidelines, information on available material in different languages, information on licensing and fees, and a request form for translated material.



## ROME FOUNDATION WORKING TEAM COMMITTEE

### The role of the intestinal microbiota in functional gastrointestinal disorders

**Magnus Simrén**  
Gothenburg, Sweden

The pathogenesis and pathophysiology of patients with functional gastrointestinal disorders remains incompletely understood. During the last years, the role of intestinal microbiota in the development of functional gut problems has received great interest, with a steadily increasing numbers of research projects assessing this. For instance, it has been convincingly demonstrated that one of the most well established risk factors for developing IBS is having a bacterial or viral gastroenteritis. However, why some, but definitely not all, subjects with a gastroenteritis go on to develop longstanding symptoms, whereas others regain their gut health within a week, is not altogether clear. Moreover, there are also suggestions that patients with IBS have abnormal composition of the colonic bacterial flora, as well as controversial findings that small intestinal bacterial overgrowth is a major factor in IBS. New treatment options for functional GI disorders based on these findings have also appeared, such as non-absorbable antibiotics, and pre-, pro- and synbiotics. Even though these findings are very intriguing and of great interest for researchers in the field, their relevance of some of these is unclear. Especially, their potential implications for the daily care of our patients are not well established. Therefore, the Rome Foundation has early 2010 decided to initiate a Working Team Committee, *The role of the intestinal microbiota in functional gastrointestinal disorders*. The purpose will be to develop a summary of the research and literature in this content area to date and then offer guidelines or

recommendations to help advance future research and clinical care. The timeline is planned to be 18 months, with the goal to submit a summary as a Working Team Report to one of the major scientific journals in our field.

#### The specific goals of the Working team are:

- To critically review the existing literature on the role of gut microbiota in functional GI disorders (FGIDs), with focus on clinical and translational aspects. This will include the relevance of post-infectious IBS, alterations in composition of small and large intestinal microflora in FGIDs, the clinical usefulness of antibiotics and probiotics in FGIDs, as well as a thorough review on the basic/translational science literature with potential clinical relevance for this group of patients. A specific focus will also be on new methodology to assess the relevance of gut microbiota in FGIDs and potential drawbacks and pitfalls with previously used methods.
- Based on the literature search, provide recommendations how to implement the current knowledge into clinical practice, in order to improve the health of our patients.
- Give recommendations for future work in order to improve the current knowledge on the role of gut microbiota in functional GI disorders.
- These goals will be summarized in an extensive, but clinically useful, review, submitted to one of the major scientific journals in our field. Moreover, there are also plans to present the results of the Working Team Committee at an international meeting as a Working Team Report.

#### Members of the Working Team

**Chair**  
Magnus Simrén  
Gothenburg, Sweden

**Clinical**  
Peter Whorwell  
Manchester, UK  
  
Brennan Spiegel, MD  
Los Angeles, CA, USA  
  
Robin Spiller  
Nottingham, UK

**Translational**  
Stephen Vanner  
Kingston, Canada  
  
Elena Verdu  
Hamilton, Canada

**Basic/Microbiology**  
Erwin Zoetendal  
Wageningen, the Netherlands

**Co-Chair**  
Giovanni Barbara  
Bologna, Italy



Douglas Drossman, MD  
Chair

## SEVERITY IN IBS WORKING TEAM

The Severity in IBS Working team has completed its literature review and we have added 3 recent publications that have focused specifically on severity assessment. This included a patient focus group, an internet survey and a survey on a clinical population. This new information will help the committee make recommendations for severity assessment in clinical trials. We plan to finish the manuscript and submit for review in a peer review journal by the end of the summer.



Lin Chang, MD  
Co-Chair

#### Committee Composition:

**Douglas A. Drossman, MD, Chair**  
UNC Center for Functional GI & Motility Disorders  
Chapel Hill, NC, USA

**Lin Chang, MD, Co-Chair**  
UCLA CNS: Center for Neurovisceral Sciences & Women's Health  
Los Angeles, CA, USA

**Nicholas Bellamy, MD, MSc, MBA, DSc, FRCP(C), FRCP, (Glas,Edin), FACP, FRACP**  
The University of Queensland  
Brisbane, Qld, AUSTRALIA

**Hugo E. Gallo-Torres, MD, PhD, PNS**  
US Food and Drug Administration  
Rockville, MD, USA

**Tony Lembo, MD**  
Beth Israel Deaconess Medical Center  
Boston, MA, USA

**Fermín Mearin, MD**  
Institute of Functional & Motor Digestive Disorders  
Centro Médico Teknon  
Barcelona, SPAIN

**Nancy Norton, BS**  
International Foundation for Functional Gastrointestinal Disorders  
Milwaukee, WI, USA

**Peter Whorwell, PhD**  
Wythenshawe Hospital  
Manchester, UK



# AGA Rome lecture to focus on gut microbiota



Erwin G. Zoetendal, PhD, will shed light on the mysteries of gut microbiota as the invited lecturer during Tuesday's third annual Rome Foundation-AGA Institute Lectureship. Dr. Zoetendal, an assistant professor in the agrotechnology and food sciences laboratory of microbiology at Wageningen University, the Netherlands, will present "Understanding Gut Microbiota: A New Era in Gastroenterology."

Moderated by Co-Chairs Lin Chang, MD, and Douglas

Drossman, MD, who serve on the Rome Foundation Board, the lecture will provide an overview of gastrointestinal tract microbiota diversity by discussing culture-independent approaches to study microbiota diversity in relation to health and disease — including functional gastrointestinal disorders — as well as culture-independent approaches to study microbiota genetic potential and activity.

Dr. Chang, a co-director at the Center for Neurobiology of Stress, University of California, Los Angeles, division of digestive diseases, said that the novel techniques that are becoming available to study gut microbiota are truly cutting-edge.

"There are so many functions these bacteria have that we are just now beginning to understand," she said. "It is our mission to improve the lives of patients with chronic gastrointestinal conditions like irritable bowel syndrome, and while it is limited, there are

some data to show probiotics can improve symptoms. Dr. Zoetendal is one of the experts in this field and should give a very interesting presentation."

"I think it will really open everyone's eyes

to a whole population of bacteria in our gut that we know very little about, as well as to the novel scientific techniques that we can use to better characterize the microbiota and their effects on gut function and apply that to gastrointestinal disease,"

Dr. Chang said. "We think of bacteria in a relatively simple way, and we

have to study it in a more sophisticated way."

Dr. Drossman, Rome Foundation president, said the Rome Foundation and the AGA Institute are honored to have Dr. Zoetendal present this year's lecture.

"There are huge numbers of bacteria living in harmony within every human organism," he said. "And this is the guy who understands best how different types affect the gut inside and out. He is a translational scientist who will help our members better understand when to use probiotics and when not to."

Dr. Drossman also is a professor of medicine and psychiatry and co-director of the Center for Functional GI and Motility Disorders in the division of gastroenterology and hepatology at the University of North Carolina School of Medicine, Chapel Hill.

'We think of bacteria in a relatively simple way, and we have to study it in a more sophisticated way.'

Lin Chang, MD



10:30AM - 11:30AM  
Tuesday, May 4 2010  
ENMCC Rm. 391/392

# PAN AMERICAN CONGRESS OF DIGESTIVE DISEASES

GUAYAQUIL, ECUADOR

SEPTEMBER 30 – OCTOBER 4, 2010

## Dr. Carlos Ledesma Ginatta

*President of AIGE 2008-2010*

*President of the XXXII Pan American Congress of Digestive Diseases  
Guayaquil 2010*

The XXXII Pan American Congress of Digestive Diseases will take place in the beautiful city of Guayaquil in Ecuador from September 30 to October 4, 2010. This event is the largest and most prestigious GI meeting in Latin America, attracting more than 3,000 physicians and will be held at the modern Convention Center of Guayaquil.

The best Professors and Doctors from the field of Gastroenterology and Digestive Endoscopy from all over the American Continent have confirmed their participation. The Scientific Committee has developed a comprehensive program that includes the continuous advances in Gastroenterology, Digestive Endoscopy, Hepatology, and Digestive Surgery. The interdisciplinary symposia on new approaches to diagnosis and treatment will emphasize on innovative technical advances in the non-invasive management of gastrointestinal and liver disorders. We will also be offering two full day postgraduate courses in Gastroenterology and Endoscopy and the Simultaneous Satellite Transmission of the Boston International Live Endoscopy Course 2010.

The organizing international societies of this Congress are: the Inter-American Association of Gastroenterology (AIGE), the Inter-American Society of Digestive Endoscopy (SIED), the Latin-American Association for the Study of the Liver (ALEH), the World Gastroenterology Organization (WGO) and the World Organization of Digestive Endoscopy (OMED). The meeting has also been endorsed by the Rome Foundation which will be sponsoring two symposiums, a scientific one and an interactive one. The first one will include topics such as gender, microbiota and pediatrics in FGIDs, and the second one will include clinical cases discussed with the audience based on the recently released Rome clinical algorithms.

In addition, the social and cultural program will offer opportunities to strengthen our ties of friendship and brotherhood. Also, it is important to highlight that Ecuador offers important attractions such as a Cruise in the Galápagos Islands that have been declared a "World Heritage Site".

*See you in Ecuador...*

PRELIMINARY ESQUEMATIC PROGRAMME & call for abstracts

XXXII PAN AMERICAN CONGRESS  
OF DIGESTIVE DISEASES

XIX PAN AMERICAN CONGRESS  
OF DIGESTIVE ENDOSCOPY

**GASTRO  
GUAYAQUIL  
2010**

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SEPTIEMBRE 30 - OCTUBRE 4/ 2010

## 9TH INTERNATIONAL SYMPOSIUM ON FUNCTIONAL GASTROINTESTINAL DISORDERS

April 8-10 2011  
Pfister Hotel  
Milwaukee, Wisconsin

This CME accredited symposium will be held April 8-10, 2011, at the Pfister Hotel, Milwaukee, Wisconsin. It is jointly sponsored by the University of Wisconsin School of Medicine and Public Health and the International Foundation for Functional Gastrointestinal Disorders. A global audience of clinicians and investigators will gather to exchange information on the latest advancements in the areas of functional gastrointestinal and motility disorders. The symposium will offer a format of plenary sessions, interactive workshops and mini symposia on both adult and pediatric disorders - from basic science to clinical applications.

### For further information:

Cara O'Brien  
IFFGD  
414-964-1799  
email: [cobrien@iffgd.org](mailto:cobrien@iffgd.org)

Terese Bailey  
OCPD in Medicine and Public Health  
608-240-2141  
email: [tmbailey@ocpd.wisc.edu](mailto:tmbailey@ocpd.wisc.edu)

## MEET THE EXPERTS SESSION AT UEGW 2010 BARCELONA, SPAIN • OCTOBER 23 – 27, 2010

18th United European Gastroenterology Week  
CCIB – Centre Convencions Internacional  
UEGF – United European Gastroenterology federation  
[www.uegf.org](http://www.uegf.org)

THE ROME  
FOUNDATION  
IS PROUD TO  
SPONSOR  
A MEET THE  
EXPERTS SESSION  
AT  
UEGW 2010

### ROME FOUNDATION SYMPOSIUM: MANAGEMENT OF DIFFICULT PATIENTS WITH FUNCTIONAL GI DISEASES

*How I manage a patient with a difficult case of...*

- Severe Abdominal Pain  
with Douglas Drossman, MD, Chapel Hill, NC, USA
- Recurrent Vomiting  
with Mark Fox, MD, PhD, Zurich, Switzerland
- Recurrent abdominal pain and Sphincter of Oddi dysfunction  
with Peter Cotton, M.D., M.A., FRCP, Charleston, SC USA

*Date and Time: TBD*

**CHAIRS:**

ROBIN SPILLER • ENRICO CORAZZIARI • FERNANDO AZPIROZ



# UEGW

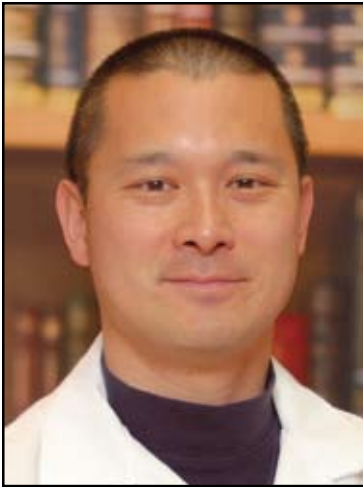
## BARCELONA 2010

18th United European  
Gastroenterology Week

[www.uegf.org](http://www.uegf.org)  
EACCME applied

**October 23 – 27, 2010 // Barcelona, Spain**  
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**CPO HANSER SERVICE GmbH** [uegw2010@cpo-hanser.de](mailto:uegw2010@cpo-hanser.de)



## WELCOME WILLIAM CHEY

**William D. Chey, MD, AGAF, FACG, FACP**  
*Professor of Medicine*  
*Director, GI Physiology Laboratory*  
*Director, Michigan Bowel Control Program*  
*Division of Gastroenterology*  
*University of Michigan Health System*  
*Ann Arbor, MI*

We are pleased to welcome Dr. William Chey as a new member of the Rome Foundation Board. Dr Chey received his medical degree and training in internal medicine at the Emory University School of Medicine in Atlanta, Ga. He went on to complete a fellowship in gastroenterology at the University of Michigan in Ann Arbor. Since completing this fellowship, Dr Chey has remained at the University of Michigan, where he is currently a Professor of Medicine in the Division of Gastroenterology and Director of the GI Physiology Laboratory and Michigan Bowel Control Program.

His research interests focus on the diagnosis and treatment of the functional bowel disorders, acid-related disorders, and *Helicobacter pylori* (*H. pylori*) infection. Dr Chey has received funding for his research from federal and private sources.

Dr Chey has authored more than 200 manuscripts, reviews and book chapters. He is Co-editor-in-Chief of the American Journal of Gastroenterology (2010-2013) and serves on the editorial boards of

Clinical Gastroenterology & Hepatology, Digestive Health Matters, Gastroenterology & Hepatology, and the Journal of Medicine.

He participated on the Clinical Study Design and Bowel Symptoms committees of the Rome III consensus guidelines and joined the Board of Directors of the Rome Foundation in 2010. He has served on various abstract review committees dealing with *H. pylori* infection, gastroesophageal reflux disease, and functional bowel and motility disorders for Digestive Disease Week and is past Chair of the Clinical Practice Section (2006-2008) of the American Gastroenterological Association. He is a member of the Board of Trustees, Publications Committee and IBS Task Force of the American College of Gastroenterology.

He has participated in and directed numerous national and international continuing medical education programs in gastroenterology, and has been elected to the roster of Best Doctors since 2001.

## The Rome Foundation/AGA Institute Lectureship at Digestive Disease Week 2010

*The Rome Foundation and the American Gastroenterological Association (AGA) are pleased to present their 3rd annual lectureship at Digestive Disease Week (DDW). The lectureship is designed to address broad aspects of healthcare that are relevant to digestive diseases and the functional GI disorders. This year's speaker will be Erwin G. Zoetendal, PhD who will speak on:*

### **Understanding Gut Microbiota: A New Era in Gastroenterology**

#### Learning Objectives

1. Provide an overview of gastrointestinal tract microbiota diversity
2. Discuss approaches to study microbiota diversity in relation to health and disease, including functional gastrointestinal disorders
3. Discuss approaches to study microbiota genetic potential and activity



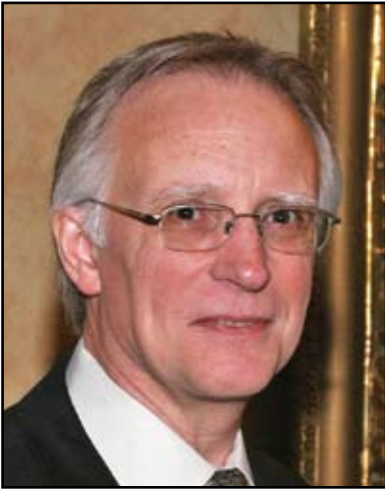
**Erwin G. Zoetendal, PhD**  
Wageningen, The Netherlands



**The program will be presented**  
 10:30-11:30 AM on Tuesday, May 4, 2010  
 Ernest N. Morial Convention Center  
 New Orleans, Louisiana



**AGA INSTITUTE**  
AGA Education, Practice and Research



## UPDATE FROM THE INTERNATIONAL FOUNDATION FOR FUNCTIONAL GASTROINTESTINAL DISORDERS

By: William F. Norton

Next year, IFFGD will be observing 20 years of service to the community. Our efforts to raise awareness and support on behalf of patients, families, investigators, and clinicians are made possible by the collaborative energy and contributions of many persons. We are grateful to all those who support our efforts or who contribute to advancements in the field.

This year we have continued to be active in Washington, DC with our advocacy efforts on Capitol Hill. These are aimed ultimately at increasing the NIH research portfolio for functional GI and motility disorders. In addition to providing testimony to the House Appropriations Subcommittee, we have been meeting with Senate and House member congressional offices to ask for:

1. Increased support for funding at NIH. We would like to see a substantial increase, to \$35 billion for Fiscal Year 2011, in order to maintain the momentum achieved through the temporary supplemental funding provided in the 2009 American Recovery and Reinvestment Act.
2. Support of the "IBS Awareness Month Resolution" aimed at raising critical awareness.
3. Support for introduction of the "IBS and Functional GI Disorders Research and Treatment Act" legislation drafted by IFFGD.

Additionally, for Fiscal Year 2010, we worked with appropriators in both the House and Senate to see that they made research recommendations to the NIH. These included congressional recommendations to the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) to prioritize and begin to implement the recommendations of the Long-Range Research Plan produced by the National Commission on Digestive Diseases; and encouragement to the Office of Research on Women's Health (ORWH) to continue strengthening research on irritable bowel syndrome.

We have been meeting with congressional leaders for the past decade explaining the needs of the functional GI disorders patients, and clinical and research communities. These efforts have paid off in helping to sustain and increase funding support. Our goal is to continue and strengthen our advocacy work.

Education and awareness are important focuses of IFFGD. The functional GI disorders continue to be widely misunderstood. Public perceptions are meaningful to patients, appropriators, and investigators seeking support. In an effort to raise the level of understanding, we recently published a "Reporter's Guide to Functional Gastrointestinal Disorders." The guide has been distributed to print, broadcast and electronic media writers and reporters. It presents a clear description of the disorders, explains the associated financial and personal costs, and encourages reporters to produce stories that will increase awareness and understanding of functional GI disorders. It can be accessed online by going to our web page at [www.iffgd.org/site/news-events/iffgd-media-center](http://www.iffgd.org/site/news-events/iffgd-media-center).

We will soon be seeking applications for IFFGD Research Awards in clinical science, basic science, and pediatrics. The awards will be presented in April 2011 at the 9th International Symposium on Functional Gastrointestinal Disorders.

**Save the date.** The 9<sup>th</sup> International Symposium on Functional Gastrointestinal Disorders will be held on April 8–10, 2011 at the Pfister Hotel in Milwaukee, WI. The meeting will again be jointly sponsored by the University of Wisconsin School of Medicine and Public Health, Office of Continuing Professional Development in Medicine and Public Health and IFFGD. Focusing on the functional GI disorders, this multi-disciplinary meeting will offer general sessions and mini symposia on a wide range of topics while providing many opportunities to meet with participants. Program details will soon be available. We look forward to seeing many of you there.

### DIGESTIVE DISEASE WEEK - BOOTH 1347 MAY 2-5, 2010

The Rome Foundation encourages all members and sponsors to visit our booth at DDW. We have many surprises in store for you and hope that you will find this year's booth innovative and exciting.

This year at DDW we will be releasing our new educational product, Diagnostic Algorithms for Common Gastrointestinal Symptoms. Visit the booth to receive your complimentary copy of the Overprint as published in the April issue of The American Journal of Gastroenterology. See pages 12-13 for more information on these algorithms.

The Rome III book, published in 2006 is still available and will be displayed as well as the Computer-Based Learning Program and our newest book: Understanding the Irritable Gut., by W. Grant Thompson, MD. You can purchase any of these products right at the Booth!

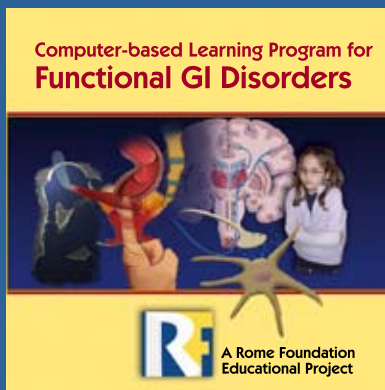
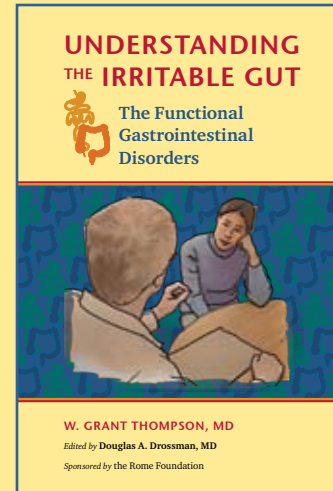
Of course, as in the past, there will also be many handouts and research materials available to you. Come visit us at Booth 1347!

# ROME FOUNDATION

*Improving the lives of people with functional gastrointestinal disorders*

## Understanding the Irritable Gut

For the first time, the information of the functional GI disorders as developed by the Rome Foundation is presented in an easy to read, non-technical format — ideal for non-gastroenterology health care professionals, students, educated patients, and the general public.



## Computer-Based Learning Program for Functional GI Disorders

Designed by the world's leading experts in functional GI disorders, the Computer-Based Learning Programs use the most up-to-date information to provide the viewer with a state-of-the-art learning experience. This set of over 750 slides covers all aspects of the functional GI disorders.

## ENDORSED BY AGA INSTITUTE

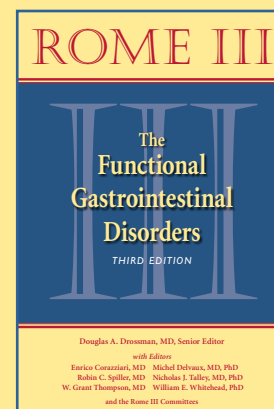


## ROME III

### The Functional Gastrointestinal Disorders

THIRD EDITION

Rome III, the highly regarded, comprehensive body of knowledge for general and specialist physicians, investigators, and others who study and care for the patients with functional GI disorders.





## MICHELE PICKARD

Please join us in welcoming Michele Pickard to the role of Administrator of the Rome Foundation.

Michelle has assumed the role as the Administrator for the Rome Foundation, coordinating the academic programs in addition to facilitating educational and research initiatives. She will provide support for the Board of Directors, and all Committees and Working teams and coordinate all meetings and related activities. She will also assist with web content and development, including e-communications, and other duties as required.

Ms. Pickard is happily married and has two beautiful daughters.

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## ABOUT THE ROME FOUNDATION

The Rome Foundation is an independent not for profit 501(c) 3 organization that provides support for activities designed to create scientific data and educational information to assist in the diagnosis and treatment of functional gastrointestinal disorders (FGIDs). Our mission is to improve the lives of people with functional GI disorders.

Over the last 20 years, the Rome organization has sought to legitimize and update our knowledge of the FGIDs. This has been accomplished by bringing together scientists and clinicians from around the world to classify and critically appraise the science of gastrointestinal function and dysfunction. This knowledge permits clinical scientists to make recommendations for diagnosis and treatment that can be applied in research and clinical practice.

The Rome Foundation is committed to the continuous development, legitimization and preservation of the field of FGIDs through science-based activities. We are inclusive and collaborative, patient-centered, innovative and open to new ideas.

The goals of the Rome Foundation are to:

- Promote clinical recognition and legitimization of the functional GI disorders
- Develop a scientific understanding of their pathophysiological mechanisms to achieve optimal treatment.



VISIT US ON  
THE WEB AT

[www.theromefoundation.org](http://www.theromefoundation.org)

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*From left to right: (Front row) Lin Chang, Doug Drossman, William Whitehead; (Back row) Fernando Azpiroz, John Kellow, Robin Spiller, Nicholas Talley, Enrico Corazzari, Jan Tack*

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