

Gut

*Journal of the British Society of Gastroenterology
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INTERNATIONAL NEWS

News about the United European Gastroenterology Federation

What is the UEGF?

The first ideas about a Federation that would combine the various European associations and societies active in gastroenterology and allied fields, surfaced during the International Congress of Gastroenterology in Rome in 1988. To many of us the many organisations all holding their own annual meetings looked like misspent energy. Therefore the idea was born to have one annual meeting in Europe for the entire field of gastroenterology, including endoscopy, gastrointestinal surgery, paediatric gastroenterology, hepatology, and pancreatology. Thus the UEGF was established. The first formal United European Gastroenterology Week (UEGW) took place in Athens, in 1992. Since then there have been UEGWs in Barcelona (1993), Oslo (1994), and Berlin (1995). The number of submitted abstracts is growing and so is the number of participants: 4000 in Oslo and over 7000 in Berlin.

How is it organised?

The UEGF is governed by a council that represents the founding members of the federation. These are: Association des Sociétés Nationales Européennes et Méditerranéennes de Gastroenterologie (ASNEMGE); Collegium Internationale Chirurgiae Digestivae (European Chapter) (CICD); European Association for Gastroenterology and Endoscopy (EAGE); European Association for the Study of the Liver (EASL); European Pancreatic Club (EPC); European Society for Gastrointestinal Endoscopy (ESGE); European Society for Paediatric Gastroenterology and Nutrition (ESPGAN).

Each of these organisations delegates two members to the UEGF council who serve on council for four years. From among these, a chairman, a vice chairman, a treasurer, and a secretary is elected. The council meets three times a year, once during the annual UEGW. Its tasks are described in the statutes and consist of the election of a venue for future UEGWs, creating a uniform scientific format for the UEGWs and establishing a longterm relationship with the biomedical industry. For the latter a code of practice document has been developed, which describes mutual tasks and obligations. The current relationship with the biomedical industry is probably unparalleled and is envied by other medical organisations. As soon as the UEGW is firmly established, the UEGF council will start working on its scientific and educational statutory tasks.

UEGF enlargement

Besides the founding members of the UEGF, there are many other European organisations active in gastroenterology, particularly in the allied fields of specialised surgery, pathology, radiology, primary care physicians, and nursing. Since the UEGF aims to function as an umbrella for all these organisations, the incorporation of new members and new ideas is vital. At present council is designing new rules to be able to embrace these organisations.

UEGW 1996: Paris

This 5th UEGW is to be held at the CNIT Conference Centre in Paris, 2–6 November 1996. There will be a three day core meeting comprising oral sessions, state of the art lectures, poster sessions, video sessions, and an exhibition of the latest pharmaceutical developments and endoscopic equipment. There will also be workshops organised by EASL and the ESGE, and postgraduate courses organised by EAGE, ESGE, and ESPGAN on clinical management of patients, endoscopic procedures, and basic mechanisms of cell function and nutrition.

1997 and on . . .

In 1997 the UEGW will be held at the ICC in Birmingham (18–22 October). This will be the 6th UEGW. The 7th will take place in Rome, but not until 1999 (13–18 November) because 1998 sees the XIth World Congress of Gastroenterology coming to Vienna (6–13 September). The UEGF will play a significant role in the representation of Europe within this event. The 8th UEGW will take place in the millennium year and is appropriately planned for Europe's heart: Brussels (25–30 November). National societies wishing to organise future UEGWs can submit a bid. For this a Guidelines and Bid Manual is required, which can be obtained from the secretariat's office. Bids are already being received for 2001, as the UEGF continues to strive for a congress of high scientific value that enables scientists and clinicians to establish new links and contribute further to the European Gastroenterology effort. The success of UEGW and the UEGF however depends upon you supporting the meeting with your scientific work and enthusiasm.

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BOOK REVIEW

Cytokines and Growth Factors in Gastroenterology. Bailliere's Clinical Gastroenterology 10:1. Edited by RA Goodlad and N A Wright. (Pp 184; illustrated; £30.00). London: Bailliere Tindall, 1996.

Two of the hottest areas in gastroenterology are the therapeutic possibilities of antagonising the effects of cytokines to prevent tissue injury and of exploiting endogenous healing mechanisms to promote gut repair. This book contains 11 chapters written by different authors on various facets of these two areas. Overall the editors would have been better restricting themselves to growth factors as this forms most of the book (8/11 chapters), and the chapters on cytokines in gut disease are not of the same standard as those on growth factors. The book however does begin with rather a good overview of cytokines by Kim Barrett. She concentrates on receptors and signalling, without reference to gastrointestinal disease, and encapsulates the key

points clearly. There then follows a chapter on cytokines and gastrointestinal disease mechanisms by Przemioslo and Ciclitira, which is more of a list of cytokines in various diseases and barely touches on potential mechanisms. There is no mention of the role of cytokines in increasing vascular adhesion molecules, probably one of the main ways by which increased concentrations of cytokines in tissue cause inflammation. Inflammatory bowel disease is also covered in this section, making the later contribution (chapter 10) from Radford-Smith and Jewell on cytokines in inflammatory bowel disease redundant. This latter chapter deals mainly with technical issues concerning measurement of cytokine transcripts and protein. This is of little interest to the general gastroenterologist and is known to the specialist.

The contributions on growth factors are good, a reflection no doubt of the editors own interests, and provide a good overview of EGF, TGF α , TGF β , IGFs, FGFs, and PDGF and trefoil peptides from acknowledged experts in the field. I enjoyed reading them, especially the chapters on TGF α by Gangarosa and colleagues, IGFs by Lund and Zimmerman, and trefoil peptides by Poulosom. I have to say that in the book overall, the quality of the contributions from authors resident in the USA is higher than that of the UK contributors, with better illustrations and organisation. An honourable exception is Richard Poulosom's chapter on trefoil peptides, which is really excellent.

I was irritated by a number of things in the book. I found the introduction patronising. The potted version of molecular biology it contains is inappropriate and irrelevant to most of the book. Admitting in the introduction that the book may be confusing because of jargon and in house jokes is guaranteed to annoy. The need to show molecular biological credentials surfaces in chapter 11 by Jankowski on the role of growth factors in the management of solid tumours where an undergraduate diagram of a Southern blot appears.

In the text this figure is firstly cited in the context of oncogenesis and I wonder if the correct figure was shown. Playford and Shaw-Smith make an interesting contribution in chapter 9 where they try to put the function of growth factors in perspective, but then spoil it by including a largely irrelevant piece on *Helicobacter pylori*.

Overall I would recommend this book to any gastroenterologist or non-clinical scientist who wishes a good, relatively up to date review of growth factors in the gut, at a reasonable price. The strengths of the book outweigh its deficiencies and the number of factual and typographical errors are within acceptable limits. This is an extremely exciting area, and through the efforts of Nick Wright and his colleagues, is one in which UK gastroenterology is a major player.

THOMAS T MACDONALD

NOTES

Sir Francis Avery Jones BSG Research Award 1997

Applications are invited by the Education Committee of the British Society of

Gastroenterology who will recommend to Council the recipient of the 1997 Diamond Jubilee Award. Applications (**twenty copies**) should include:

- (1) A manuscript (2 A4 pages *only*) describing the work conducted.
- (2) A bibliography of relevant personal publications.
- (3) An outline of the proposed content of the lecture, including title.
- (4) A written statement confirming that all

or a substantial part of the work has been personally conducted in the UK or Eire.

Entrants must be 40 years or less on 31 December 1997 but need not be a member of the BSG. The recipient will be required to deliver a 40 minute lecture at the Diamond Jubilee meeting of the Society in March 1997. Applications (**twenty copies**) should be made to the Honorary Secretary, BSG, 3 St Andrews Place, London NW1 4LB, by 1 December 1996.

Laparoscopic surgery

A European Course on Laparoscopic Surgery will be held in Brussels on 19 to 22 November 1996. Further information from Administrative Secretariat, Conference Services sa, Avenue de l'Observatoire, 3 bte 17, B-1180 Brussels, Belgium. Tel: 32 2 375 16 48; fax 32 2 375 32 99.

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Gut publishes original papers, short rapid communications, leading articles, and reviews concerned with all aspects of the scientific basis of diseases of the alimentary tract, liver, and pancreas. Case reports will only be accepted if of exceptional merit. Letters related to articles published in *Gut* or with topics of general professional interest are welcomed. Authors should include the names and addresses of four experts whom the authors consider suitable to peer review their work.

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ACKNOWLEDGEMENT OF MANUSCRIPTS Manuscripts will only be acknowledged if an addressed postcard is enclosed.

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ETHICS Ethical aspects will be considered in the assessment of papers (see the Medical Research Council's publications on the ethics of human experimentation, and the World Medical Association's code of ethics, known as the Declaration of Helsinki (see *BMJ* 1964; ii: 177)).

SI UNITS All measurements except blood pressure are expressed in SI units. In tables and illustrations values are given in SI units. For general guidance on the International System of Units and some useful conversion factors, see *The SI for Health Professions* (WHO,

1977). NB: Such conversion is the responsibility of the author.

REFERENCES These follow the Vancouver system - that is, references numbered consecutively in the text and listed numerically with journal titles abbreviated in the style of *Index Medicus*, *Standard journal article*. List up to six authors, then add *et al*.

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