Inflammatory Bowel Diseases

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The incidence of inflammatory bowel diseases (IBD) is rising worldwide, and while the number of therapeutic options is increasing, providing the individual patient with a satisfactory therapeutic solution to secure quality of life is still a challenge. During recent years, the number of pharmacologic options has increased rapidly, and there are still many options awaiting approval in the immediate future [1]. In this issue of *Visceral Medicine*, we will therefore provide an update on current therapeutic concepts and how the choice of therapy is influenced by the individual patient's profile.

Another rapidly expanding field is the exploration of interactions between the intestinal microbiota and the mucosal immune system [2]. While these data currently are not part of daily patient care, many concepts will soon be ready for implementation into individualized patient care and therapeutics. Adequate care for patients with IBD requires a close interaction between gastroenterologists and colorectal surgeons [3]. Many challenges in IBD treatment can only be managed in multidisciplinary teams.

One of these challenges is the management of fistulas in Crohn's disease, which is reviewed in this issue by Seyfried and Herold [4]. Another field that demands close interaction between medical and surgical partners is the optimization of patients awaiting surgery [5]. Only close cooperation results in a low rate of complications and therefore helps us to reach our goal to increase the quality of life of our patients.

References

- 1 Einwächter H. Current concepts of pharmacotherapy in Crohn's disease. *Visc Med.* 2019;35(6). <https://doi.org/10.1159/000504101>.
- 2 Aden K, Reindl W. The gut microbiome in inflammatory bowel diseases – diagnostic and therapeutic implications. *Visc Med.* 2019;35(6). <https://doi.org/10.1159/000504148>.
- 3 Kroesen AJ. Early surgery in inflammatory bowel diseases is a better option than prolonged conservative treatment. *Visc Med.* 2019;35(6). <https://doi.org/10.1159/000504150>.
- 4 Seyfried S, Herold A. Management of perianal fistulas in Crohn's disease. *Visc Med.* 2019;35(6). <https://doi.org/10.1159/000504103>.
- 5 Reindl W, Thomann AK, Galata C, Kienle P. Reducing perioperative risks for surgery in Crohn's disease. *Visc Med.* 2019;35(6). <https://doi.org/10.1159/000504030>.