

the RECORDER

American Neurogastroenterology and Motility Society

Spring 2012 • Volume 1 • Number 1

The President's Message



Satish SC Rao, MD, PhD, FRCP, FACC

My fellow neurogastroenterologists & motility experts, the Spring Newsletter is here! It is a time for celebration as we begin a new chapter in the history of our Society. As the year 2012 rolled in, we witnessed the consolidation and reaffirmation of our merged Society. Moving forward, I am confident that we will usher in a new beginning for our Society. Once again through the hard work of our Councillors and the various committees, we have emerged as a stronger Society, with clear goals and missions and significant new achievements. Allow me to touch on the highlights, and *The Recorder* provides more details in the Committee Chairs' reports

that follow this message. I hope you like the new format of *The Recorder*.

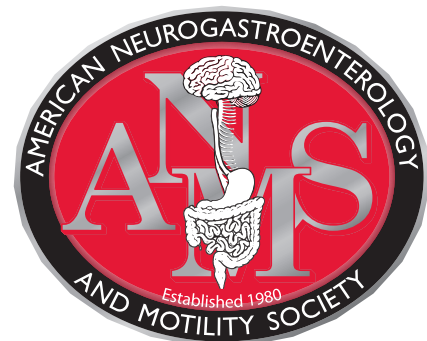
What have we accomplished?

After extensive deliberations for over a year, the Naming Committee chaired by Henry Parkman proposed three names for our merged society and input was sought from members-at-large and Council. In December 2011, ANMS-FBG Society members were invited in a secret ballot to choose one of three proposed names that best represent the past, present, and future vision and goals of our merged societies. As shown by the polling results below (nearly 70% of members voted), a significant majority of members elected to name our new merged society as "American Neurogastroenterology and Motility Society". Henceforth, this will be the official name of our Society.

Ballot Results	Response
American Neurogastroenterology and Motility Society (ANMS)	48.30%
American Neurogastroenterology Society (ANS)	35.70%
American Society for Neurogastroenterology, Motility, and Functional GI Disorders (ASNMF GD)	16.00%

Annual Retreat

The Council at its annual retreat in January 2012, also deliberated on a new logo for our society. After several months of discussion and exchange of ideas and many designs that were discussed and modified, and in keeping with our spirit of merger and camaraderie, and bringing together our expanding interests and diversity, in particular the brain-gut interactions, the Council has unanimously voted and approved the following logo, which I am pleased to share with you. Henceforth, this will be the official logo of our Society.



Officers

Satish S. C. Rao, MD, PhD
President

Lin Chang, MD
President-Elect

Carlo DiLorenzo, MD
Secretary

John Wiley, MD
Treasurer

Anthony Bauer, PhD
Councilor

Adil Bharucha, MD
Councilor

Jiande Chen, PhD
Councilor

James Galligan, PhD
Councilor

Beverley Greenwood-Van Meerveld, PhD
Councilor

Margaret Heitkemper, RN, PhD
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Gary M. Mawe, PhD
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Richard McCallum, MD
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Helen Raybould, PhD
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Immediate Past President, ANMS

Emeran A. Mayer, MD
Immediate Past President, FBG

Nancy Norton
Ex Officio

Lori Ennis
Executive Director

Publication

The Recorder is published twice a year.

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Research Committee



The Research Committee chaired by Helen Raybould received several outstanding grants for research support. After careful appraisal, two grants of \$30,000 each were awarded. The research grants will be a permanent feature of our society's efforts to support research and two more grants will be awarded in 2013.

Grant Awardees 2012

Steven Coen (clinical)

Barts and The London School of Medicine and Dentistry, London, UK
Exploring the role of serotonin in the modulation of visceral pain by emotion

Guillaume de Lartigue (basic science)

University of California, Davis, USA
Determining the role of two novel neuropeptide transmitters expressed by vagal afferent neurons

2013 ANMS Research Grant Program

Submission deadline: November 9, 2012

Award start date: January 2013

For more information on selection criteria and eligibility, please consult the ANMS Web site www.motilitysociety.org.

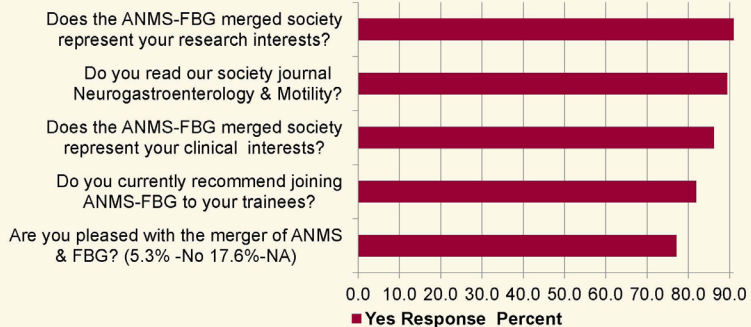
Membership Committee



The membership committee led by Beverley Greenwood were hard at work for over a year, engaging with you and assessing current and future needs. Thanks to all of you for returning our surveys, yes over 75% of members returned their surveys. We are pleased to provide summary slides of this survey below and on the next page. In brief, overwhelmingly, over 90% of members are pleased with the merger of the two societies and the direction we are moving. They are happy with the scientific discourse, particularly the 16th biennial Scientific meeting in St Louis, and overwhelmingly expressed a strong interest in continuing biennial abstract driven Scientific meetings in North America and also a biennial postgraduate course the following year. This year we will send out **official membership certificates** to all members of our society. You will receive this in the mail or pick this up at our meeting in Chicago.

Membership Questionnaire

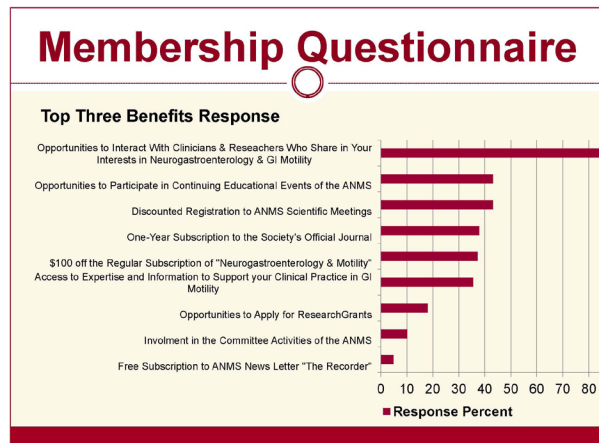
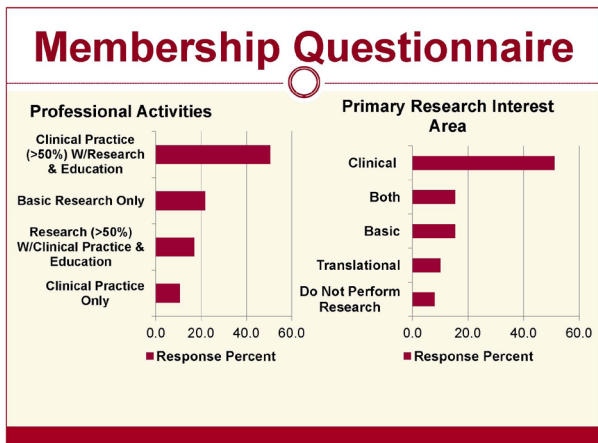
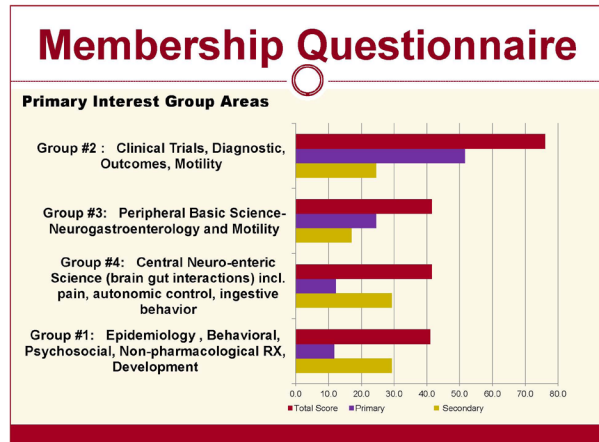
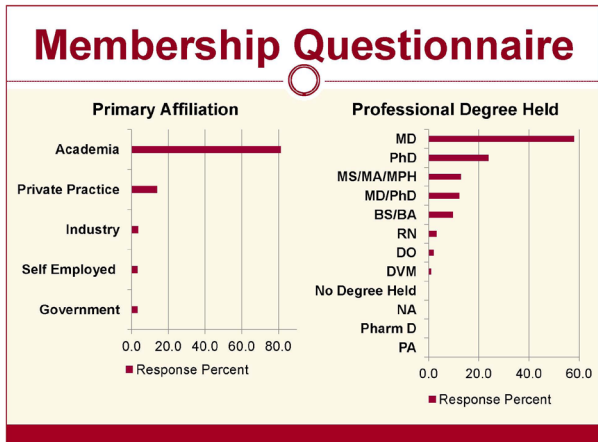
Member Satisfaction with ANMS-FBG Merger





Current ANMS Council members at Retreat in January, 2012

Right to Left 1st row: M Camilleri, E Mayer, L Chang, S Rao, J Galligan, J Chen B Naliboff. 2nd row: A Bauer, A Bharucha, R Shaker, H Parkman, B Greenwood, C Di Lorenzo, G Mawe, J Wiley, H Raybould, M Heitkemper





Federation of Neurogastroenterology & Motility

Plans are moving along nicely with the Federation of Neurogastroenterology & Motility, our new international umbrella organization, under whose auspices we will be hosting the joint international motility meetings hereafter. Currently, the Federation includes three Full members, the American Neurogastroenterology and Motility Society, the European Society of Neurogastroenterology & Motility and Asian Neurogastroenterology & Motility Association. **Our next meeting is in Bologna, September 6-8, 2012. Please make every effort to attend and support our ESNM colleagues who are working tirelessly to ensure its success.**



Little Brain Big Brain

The AMMS council approved support of the LBBB 2012 meeting with a unrestricted grant of \$10,000.00.

This grant is subject to the following conditions:

1. After 2012, LBBB will only hold its future meetings along with the international FNM meetings starting 2014. The venue will be the same as the FNM meetings, and LBBB will work with the local organization team and hold their meeting either before or after the FNM meetings.
2. This grant support is a one time payment only and future support will be through the FNM executive Board to which LBBB must submit a proposal at least 18 months in advance.
3. The organization and scientific content of LBBB meeting will be determined by LBBB and not by FNM or its individual societies.

Clinical Practice & Education



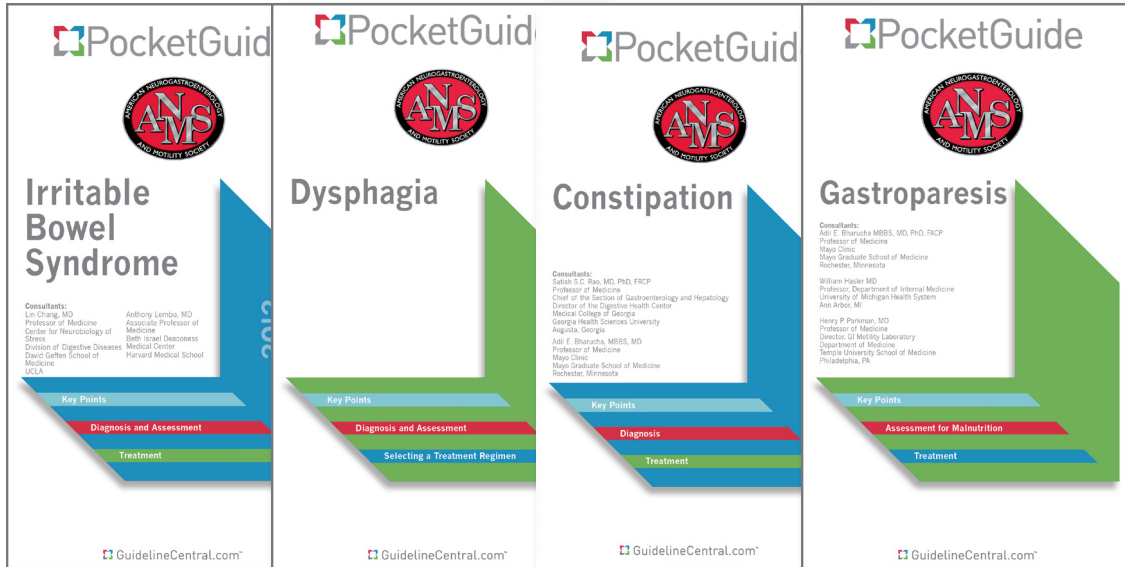
The Clinical Practice Committee and Education Committees under the stewardship of Lin Chang and Adil Bharucha with the help of Ronnie Fass have spearheaded efforts for the development of Guideline Pocket cards. These evidence-based and algorithmic clinical decision making reference tools cover diagnosis and treatment options. The pocket card provides an excellent and up-to-date quick overview of Irritable Bowel Syndrome, Chronic Constipation, Gastroparesis and Dysphagia, four important and common clinical problems. These four pocket cards will be on display at DDW – **check them out at the ANMS booth #3833!** For more information on these pocket cards, please go to our web site www.motilitysociety.org.

The Clinical Practice Committee is also facilitating the development of Society guidelines and Position papers on Management of Oropharyngeal Dysphagia, Biofeedback Therapy and Esophageal Motor disorders. Drs. Satish Rao and William Chey represented ANMS at the AMA CPT editorial panel in February and successfully argued for the issuance of a new CPT code for Wireless Motility capsule (SmartPill). This has been approved.

Clinical Training Program We have trained 97 trainees across North America since the inception of this program in 2006 and will be training another 20 fellows during the next year. We held a Program Director's Meeting with the 10 centers of excellence at the 2011 ACG meeting where they participated in updating the lecture slides and test questionnaires.

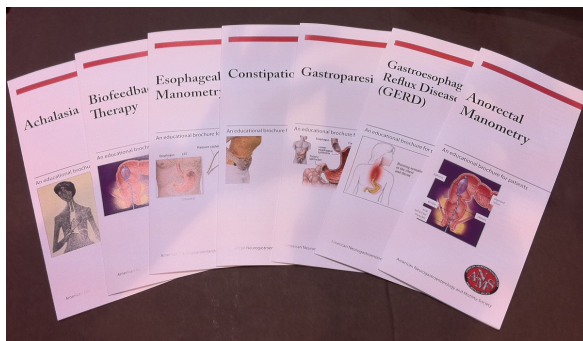
Education Committee The committee led by Adil Bharucha helped organize the Postgraduate Course for St. Louis. The CME evaluations received from the participants showed that the course was exceptionally good. The planning committee took the comments into account in planning the **7th Postgraduate Course to be held in Chicago July 27-29, 2012.**

Young Investigator Forum: 15 young investigators successfully participated in the 7th Forum in St. Louis in 2011 and 15 more will participate in Chicago, in July 2012.



Patient Education

The patient education brochures are now available. Topics include achalasia, anal fissure, biofeedback therapy, constipation, GERD, gastroparesis, fecal incontinence, IBS, manometry (anorectal, colonic, and esophageal), esophageal pH monitoring test, and chronic intestinal pseudo-obstruction. Please ask your institution to subscribe for these brochures. They are available at a nominal price. Consider displaying them in your outpatient practice centers as this also promotes our Society and the work we do. They are excellent and authoritative tools for patient education of various motility procedures and common topics and an excellent resource for patients. Members can download handouts of these materials free. Please go to the ANMS web site www.motilitysociety.org.



Patient Education Brochures

News from the International Foundation for Functional Gastrointestinal Disorders

IFFGD is Seeking Applications for 2013 Research Awards

The awards will be offered to active investigators 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 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. Individuals selected for awards will be recognized at IFFGD's 10th International Symposium for Functional GI Disorders to be held in Milwaukee, WI on April 12-14, 2013. The deadline for receipt of applications is October 1, 2012. For details visit: www.giresearch.org/awards.

10th International Symposium on Functional Gastrointestinal Disorders • Date: April 12-14, 2013

Location: Pfister Hotel, Milwaukee, Wisconsin
Jointly sponsored by the University of Wisconsin School of Medicine and Public Health, Office of Continuing Professional Development in Medicine and Public Health, and the International Foundation for Functional Gastrointestinal Disorders. A global audience of clinicians and investigators will exchange information on the latest advancements in 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: Elisabeth Vink, IFFGD
phone: 414-964-1799; e-mail: symposium@iffgd.org



Where Are We Going?

All of you are invited to our **2nd annual DDW reception: Monday, May 21 at the Hilton Bayfront Hotel in the Sapphire A Room from 6:30–8:00 pm in San Diego, California.** Here we will relaunch our new Society and its new logo and also announce the results of our President Elect and New Council Members and recognize our sponsors. Join us for our **7th Postgraduate Course on GI Motility & Neurogastroenterology in Clinical Practice, July 27–29, 2012 in Chicago.** Professor Nick Read from Sheffield, UK will deliver the 3rd ANMS Tripuraneni oration. The highlights of this meeting will include several new live demonstrations of motility procedures that have never been presented live and an outstanding postgraduate program. Also, we have a special feature: a **Patient–Physician forum** where we will spend one half day educating, informing, listening, learning, and interacting with our patients and patient support groups. This will be combined with the **8th Young Investigator Forum. Register by June 15th for a discounted registration rate.**



We are also finalizing plans for our **17th ANMS Scientific Meeting** to be held **September 20–22, 2013 in Huntington Beach, California.** The **Abstract Deadline** is March 15, 2013. The Scientific Committee will be chaired by Lin Chang and will comprise of the following members: Ronnie Fass, Jim Galligan, Margaret Heitkemper, Emeran Mayer, Robert Shulman, and John Wiley.

ANMS Nominating Committee and Ballot Results

We would like to thank the following officer and council members for their service to our society as their term will end in September 2012: Tony Bauer, Jiande Chen, Shin Fukudo, Jim Galligan, Richard McCallum, Helen Raybould, Reza Shaker, Magnus Simren, and John Wiley. The Nominating Committee that comprised Michael Camilleri, Chair, Emeran Mayer, William Whitehead, and Yvette Tache produced a ballot for voting on a President-elect, Treasurer, and four Council Members. The ballot results are in and the new officers and council members are **President-elect:** John Wiley; **Treasurer:** Ronnie Fass; **Council:** Benson Massey, John Pandolfino, Catia Sternini, and Keith Sharkey. Thank you to the Nominating Committee for their efforts on preparing this ballot.

In closing, I applaud each of you for your constant encouragement and inspiration during my presidency so far, and for sharing my vision. Also, I wish to share excerpts from a recent interview that you may find interesting. I am sure you will agree that together we have transformed our Society and have positioned ourselves as key players not only for our members' scientific achievements, particularly our young investigators, but also as leading advocates for our patients needs, and importantly for training the next generation of neurogastroenterologists and motility experts. Our work and our society is in evolution and we have a lot more to do! Thank you for your dedication, love, and support.

Satish Rao, MD, PhD, FRCP, FACC
President



Excerpts from an interview with the ANMS President

Dr Rao, you are President of the American Neurogastroenterology & Motility Society (ANMS). What is the mission of the ANMS and what do you hope to accomplish during your presidency?

The ANMS is a dynamic, growing and vibrant society of scientists, clinicians, trainees, nurses and allied health professionals. It is an honour to serve as its President. In our 32nd year, we have made some major strategic changes that has resulted in a stronger society and one which represents the broad spectrum of our members.

The mission of the ANMS is to advance the science of neurogastroenterology and GI motility, to translate the scientific advances to patient care and to disseminate new knowledge to patients and care givers. During my presidency, my goal is to invigorate our merged society and position ANMS as a key North American organization that fosters excellence in science, medical care and education of gastroenterologists and trainees, to improve the society's organizational structure and to build a strong and secure future by doubling its endowment, reach out to sister societies and establish collaborative relationships for education, training and research and promote awareness of common GI motility disorders in our society and at NIH.

Two years after the historical merger of the ANMS and FBG, in July, 2012 the ANMS postgraduate Course will take place in Chicago. Why do you recommend attending this Meeting? What should the practising gastroenterologist expect in Chicago?

In January 2012 the members of our society have elected its new name American Neurogastroenterology & Motility Society and our Society has a new Logo. I am honored to not only serve as its 13th President, but also the first President to preside over our merged societies and to lead ANMS during the 16th Scientific meeting & 6th Postgraduate Course which was attended by a record number of delegates at St Louis in 2011 and now for the upcoming 7th biennial postgraduate course in Chicago. This three-day meeting will include a packed course with live demonstrations of upper and lower gastrointestinal motility procedures, and a unique format of workshops and case discussions

along with several video-demonstrations. Any health care professional who wishes to learn the basics or the most advanced techniques and practice of this field will gain immense new knowledge. We will also host a Patient-Physician forum in collaboration with prominent patient support groups such as IFFGD, Cyclic vomiting syndrome, gastroparesis, Pseudo obstruction. Also, there will be a special Young Investigator Forum where senior fellows and post-docs will receive one-on-one training on how to be an academician and a leader. Thus, this meeting will serve as a unique blend of science, learning, education, training and camaraderie for all ANMS members across North America as well as for a practicing gastroenterologist and people involved in this field.

Your research interests include pathophysiology and treatment of constipation and fecal incontinence. Could you briefly describe your research projects and what you are investigating of late?

My research interests focus on non-cardiac esophageal chest pain, Dietary fructose intolerance, irritable bowel syndrome particularly brain-gut interactions and most significantly on constipation and fecal incontinence. Together, these problems affect over one third of our population. They cause significant morbidity and affect the quality of life, and yet until recently had received little attention, including NIH funding. With regards to constipation, our research efforts have focused on characterizing and treating one important subtype of constipation, dyssynergic defecation. Here, the act of defecation is incoordinated. Our research has helped to define the problem, establish diagnostic criteria, evaluate the demographic and symptom profiles, examine pathophysiological mechanisms and most significantly, develop and critically evaluate biofeedback treatment. We have also developed a unique home biofeedback program and are currently investigating the bidirectional brain-gut neurobiological axis. In the field of fecal Incontinence, we are investigating newer diagnostic modalities such as trans-lumbar and trans-sacral motor evoked potentials as well as novel high definition topographic manometry to define normal and abnormal anorectal function.



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What are some of the clinically relevant consequences of your investigations?

Our research has facilitated the establishment of Biofeedback as the preferred treatment for dyssynergic defecation therapy. The development of home biofeedback may allow wider use of this technology. A better understanding of the mechanisms of pain in chest pain may lead to development of new therapies. Likewise the recognition of dietary fructose and fructan intolerances could lead to new enzymatic or food-based therapies to alleviate these conditions. The development of newer techniques such as spino-anal and spino-rectal MEP assessments, for the first time provides a non-invasive and objective method of defining neurological basis for fecal incontinence and in many patients with spinal cord injury. Similarly, the advent of wireless motility capsule for comprehensive evaluation of regional and whole gut transit will provide a standardized assessment of patients with generalized dysmotility.

Looking back to your medical education – which were the most important lessons you have learned for your practical work as physician and for your medical career?

Having learnt the art and practice of medicine in three different continents, I believe my post graduate training in United Kingdom where I learnt the art and science of patient care,

education and research had a significant impact on my career as a physician, and as an academic gastroenterologist. I learnt how to seek out puzzling clinical problems and take them on as challenging research ideas. My most important lesson is to always be patient-centric and aim to provide the best and the highest quality of clinical care.

With regards to your professional and your research work – is there any goal you wish to reach in future?

As a gastroenterologist, I have watched with significant dismay the transformation of our speciality from one of cognitive medicine to that of technical wizardry. I applaud the endoscopic and technological advances that have provided us with greater accuracy and precision of diagnosis, but am saddened to witness the significant erosion and disappearance of the fundamental tenets of a strong physician-patient relationship and the near extinction of a compassionate physician. My immediate goal as a thought leader, is to train, empower and establish a neurogastroenterology and motility unit in every academic center in the United States and in every community in this country as I believe that neurogastroenterologists are best equipped to bring about a real change by balancing scientific advances with compassionate patient care.