Revisiting IBD Management: Dogmas to be Challenged

September 30 – October 1, 2011
Sheraton Brussels Hotel
Belgium
12 credit hours (CME) have been awarded for the Falk Symposium 179 “Revisiting IBD Management: Dogmas to be Challenged” by the European Union of Medical Specialists (UEMS) – European Board of Gastroenterology (EBG).
The field of inflammatory bowel disease is rapidly evolving. Our knowledge of genetic predisposition, immunological mechanisms and disease behaviour has never expanded as widely as in the last decade. Our tools to accurately visualize the extent and severity of inflammation and to detect dysplasia and cancer have become highly reliable. The list of novel small molecules and biologic agents targeting various mechanisms in the inflammatory cascade and in the vascular adhesion system is virtually endless. Yet, many relevant questions remain unanswered when it comes to daily IBD management.

What is the optimal target for disease control? Why does IBD often ‘escape’ despite a time window of successful response to certain treatments? Why does the disease behaviour sometimes change drastically during the disease course? Why is postoperative recurrence of Crohn’s disease virtually inevitable?

Although we have been convinced that we had found many answers to these questions, we need to realize that many such ‘dogmas’ need to be questioned and readdressed. The 106th FALK symposium wishes to contribute to this critical attitude vis à vis ‘ancient beliefs’ in the field of IBD. The era of evidence based medicine forces us to critically review scientific data, to rephrase certain standards and, above all, to translate novel insights into the daily care for our patients.

As scientific organizers of this symposium, we hope that you will join us on this exciting scientific and clinical journey through the world of IBD. We hope to go home with a clearer view of the intriguing enigma that is IBD.

Geert D’Haens MD, PhD
Also on behalf of Severine Vermeire and Axel Dignass
Revisiting IBD Management: Dogmas to be Challenged

Sheraton Brussels Hotel
Belgium

Registration:
Thursday September 29, 2011
16.00 – 21.00 h
at the congress office

Information:
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E-Mail: gdhaens@amc.uva.nl

Scientific Organization:
G. D’Haens, Amsterdam (The Netherlands)
A. Dignass, Frankfurt (Germany)
S. Vermeire, Leuven (Belgium)

Official Language:
English

Congress Venue:
Sheraton Brussels Hotel
Place Rogier 3
1210 Brussels
Belgium

Poster session:
For details see page 11
Friday, September 30, 2011

9.00 Welcome

Dogma 1 – IBD is a disorder of defective autophagy and innate immunity

Chair: S. Danese, Rozzano; J. Satsangi, Edinburgh

9.05 Introduction

9.10 Evidence from genetics for the role of autophagy and innate immunity in pathogenesis of IBD

9.40 Bacterial interactions with innate mucosal immunity

10.05 Endoplasmatic reticulum stress and inflammation

10.30 How can innate immunity be stimulated or “corrected”?

10.55 Wrap-up

11.00 Coffee break with poster session

Dogma 2 – No bacteria, no IBD

Chair: A. Darfeuille-Michaud, Clermont-Ferrand; W. M. de Vos, Wageningen

11.20 Introduction

11.25 Lessons from diversion studies and antibacterial interventions

11.45 Pouchitis and the role of bacteria in prevention and treatment of IBD

12.05 The role of anti(mycobacterial interventions in the current management of IBD: Is there evidence at all?

12.30 The gut microbiome in health and IBD: Targets for the future?

12.55 Wrap-up

13.00 Lunch break with poster session
Friday, September 30, 2011

Dogma 3 – TNF plays a pivotal role in IBD

Chair: P. Rutgeerts, Leuven; H. Tilg, Innsbruck

14.00 Introduction

14.05 Is efficacy of anti-TNF therapy really related to neutralisation of TNF and apoptosis?
G. R. van den Brink, Amsterdam

14.30 Mechanisms of relapse and loss of response to anti-TNF treatment
M. Allez, Paris

14.55 Anti-TNF therapy in CD and UC: Similar diseases, similar efficacy?
R. Panaccione, Calgary

15.15 Therapeutic alternatives after failure of anti-TNF treatment for IBD
J. Satsangi, Edinburgh

15.35 Wrap-up
H. Tilg, Innsbruck

15.40 Coffee break with poster session

Dogma 4 – Steroids are useful for the management of IBD

Chair: G. D’Haens, Amsterdam; S. B. Hanauer, Chicago

16.00 Introduction
S. B. Hanauer, Chicago

16.05 Do steroids have an adverse effect on IBD outcome and healing?
G. van Assche, Leuven

16.25 Pathophysiological changes during steroid treatment for IBD
Y. Chowers, Tel Hashomer

16.50 Steroids with biologicals: Allies or enemies?
B. G. Feagan, London (ON)

17.15 Novel steroid formulations: Higher efficacy, less toxicity?
S. Danese, Rozzano

17.40 Wrap-up
G. D’Haens, Amsterdam

17.45 End of afternoon session
### Saturday, October 1, 2011

**Dogma 5 – Early and late Crohn’s disease are distinct entities**

**Chair:** G. Mantzaris, Athens; C. J. van der Woude, Rotterdam

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<th>Time</th>
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<tr>
<td>8.30</td>
<td>Introduction</td>
<td>C. J. van der Woude</td>
<td>Rotterdam</td>
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<tr>
<td>8.35</td>
<td>Epidemiology of transition from early to late Crohn’s disease</td>
<td>E. Louis</td>
<td>Liège</td>
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<td>8.55</td>
<td>Markers that differentiate early from late IBD</td>
<td>S. Kugathasan</td>
<td>Atlanta</td>
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<td>9.20</td>
<td>Can fibrosis be prevented in Crohn’s disease?</td>
<td>M. Sans Cuffi</td>
<td>Barcelona</td>
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<tr>
<td>9.45</td>
<td>Can we slow down evolution from early to late CD?</td>
<td>S. Schreiber</td>
<td>Kiel</td>
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<td>10.10</td>
<td>Wrap-up</td>
<td>G. Mantzaris</td>
<td>Athens</td>
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**Coffee break with poster session**

### Dogma 6 – Innovative treatments will offer a better outcome for patients with IBD

**Chair:** S. Schreiber, Kiel; S. P. L. Travis, Oxford

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<tr>
<td>10.45</td>
<td>Introduction</td>
<td>S. P. L. Travis</td>
<td>Oxford</td>
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<td>10.50</td>
<td>Biologic therapies: Lessons from MS</td>
<td>S. Ghosh</td>
<td>Calgary</td>
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<td>11.15</td>
<td>Current status of mesenchymal stem cell and bone marrow transplantation in IBD</td>
<td>E. Ricart</td>
<td>Barcelona</td>
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<td>11.35</td>
<td>Resetting the mucosal immune system: Dream or reality?</td>
<td>T. T. MacDonald</td>
<td>London</td>
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<td>12.00</td>
<td>Old wine in new bags: 5-ASA revisited?</td>
<td>A. Dignass</td>
<td>Frankfurt</td>
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<td>12.25</td>
<td>Wrap-up</td>
<td>S. Schreiber</td>
<td>Kiel</td>
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**Lunch break with poster session**
Saturday, October 1, 2011

13.30  Presentation of Poster Prizes

**Dogma 7 – Patient tailored therapies are superior to algorithmic approaches in IBD**

**Chair:** F. Baert, Roeselare; B. G. Feagan, London (ON)

13.40  Introduction  
F. Baert, Roeselare

13.45  Predicting the disease course from diagnosis  
J. Panés, Barcelona

14.10  How to guide therapeutic decisions in a patient-tailored approach?  
P. Rutgeerts, Leuven

14.35  Pharmacogenetics and prediction of therapy success  
D. McGovern, Los Angeles

15.00  Approach to IBD: Treating the disease or the patient? How I do it.  
S. B. Hanauer, Chicago

15.20  Wrap-up  
B. G. Feagan, London (ON)

15.25  Coffee break with poster session

**Dogma 8 – Immunosuppression puts IBD patients at risk for severe complications**

**Chair:** J.-F. Colombel, Lille; D. Franchimont, Brussels

15.55  Introduction  
D. Franchimont, Brussels

16.00  Combined immunosuppression is more dangerous than monotherapy: What is fact and what is rumor  
J. Schölmerich, Frankfurt

16.20  Prevention and management of infectious complications in IBD  
J. F. Rahier, Yvoir

16.40  Lymphoma and cancer in IBD: Can they be prevented?  
L. Beaugerie, Paris

17.00  How to manage IBD in patients with infections or malignancies?  
A. Kohn, Rome

17.20  Wrap-up  
J.-F. Colombel, Lille
Wrap-up session
Leaving the dogmas behind and looking into the future

Chair: M. de Vos, Gent; R. Panaccione, Calgary

17.25 Towards a novel molecular classification of IBD S. Vermeire, Leuven
17.40 Towards objective disease measurement M. de Vos, Gent
17.55 Towards individualized therapeutic approaches in IBD G. D’Haens, Amsterdam
18.10 Toward a “cure” for IBD C. Fiocchi, Cleveland
18.30 Discussion

18.40 End of meeting
Poster Session

Posters will be exhibited on September 30 and October 1, 2011, at the Sheraton Brussels Hotel. The authors will be in attendance during coffee and lunch breaks on both days.

1. Anemia in pediatric ulcerative colitis and Crohn’s disease: Role of hepcidin and interleukines
   N. Anastasevitch, E. Mitina, N. Smetanina, S. Belmer, L. Karpina (Moscow, RU)

2. Autophagy and mTORC1 activity are dysregulated in Crohn’s disease and ulcerative colitis
   F. Capitan, C. Stevens, C. Lees, J. Satsangi (Granada, ES; Edinburgh, GB)

3. Allelic variants of the multidrug resistance gene (MDR1/ABCB1) and response to corticosteroid therapy in patients with inflammatory bowel disease
   S. Cukovic-Cavka, M. Brinar, N. Bozina, K. Grubelic Ravic, Z. Krznaric, M. Rojnic Kuzman, J. Sertic, B. Vucelic (Zagreb, HR)

4. Transcription factor NFATc3 has tumorsuppressive effect in experimental tumor model of colorectal cancer
   K. Gerlach, M.F. Neurath, B. Weigmann (Erlangen, DE)

5. Intestinal permeability in Crohn’s disease and its relationship with the disease characteristics
   V. Gerova-Nankova, D. Svinarov, S. Stoynov (Sofia, BG)

6. Role of β-catenin in ulcerative colitis
   K. Guzinska-Ustymowicz, A. Pyczynicz, J. Kisluik, K. Niewiarowska, M. Gryko, D. Cepowicz, A. Borusk, A. Kemona (Bialystok, PL)

7. The roles of Heliobacter hepaticus in the initiation and the maintenance of colitis in the gnotobiotic system in mice

8. Micronucleus evaluation in mitogen-stimulated lymphocytes of patients with ulcerative colitis
   A. Karaman, Z. Hamurcu (Kayseri, TR)

9. Immunomodulatory effect of the nitrogen-containing bisphoshonate pamidronate in the sodium dextran sulphate-induced colitis in rats
   R. López Posadas, M.D. Suarez, A. Zarzuelo, O. Martínez-Augustin, F. Sanchez de Medina (Erlangen, DE; Granada, ES)
10. The flavonoid glycoside rutin exerts immunomodulatory effects on epithelial cells
C. Mascaraque, I. Romero-Calvo, R. López Posadas, M.D. Suarez, A. Zarzuelo,
O. Martínez-Augustin, F. Sanchez de Medina (Granada, ES; Erlangen, DE)

11. Inflammatory bowel disease patients failing anti-TNF therapy show activation of
the Th9/Th17 pathway
N. Nalleweg, B. Weigmann, R. Atreya, Y. Zopf, H. Neumann, C. Neufert,
K. Hildner, H. Kessler, T. Bernatik, A. Hartmann, C. Becker, M.F. Neurath,
J. Mudter (Erlangen, DE)

12. Non-absorbable glucids (prebiotics) directly contribute to the intestinal immune
defense, increasing the production of cytokines by enterocytes
M. Ortega Gonzáles, B. Ocón Moreno, A. Anzola Santander, I. Romero-Calvo,
A. Zarzuelo, M.D. Suarez, F. Sanchez de Medina, O. Martínez-Augustin
(Granada, ES)

13. Antibiotic therapy counteracts the delay in healing of experimental colitis exhibited
by NSAID and selective cyclooxygenase (COX)-2 inhibitor
R. Pajdo, M. Zwolinska-Wcislo, D. Drozdowicz, A. Targosz, M. Strzalka,
W. Bielanski, T. Mach, T. Brzozowski (Krakow, PL)

14. Nitric oxide-releasing aspirin accelerates the healing process of experimental
colitis. Comparison with conventional aspirin and cyclooxygenase (COX)-2
selective inhibitor
R. Pajdo, M. Zwolinska-Wcislo, S. Kwiecien, G. Krzysiek-Maczka, A. Ptak-Belowska,
Z. Sliwowski, S.J. Konturek, W.W. Pawlik, T. Brzozowski (Krakow, PL)

15. A shift in the composition of innate lymphoid cell populations in Crohn’s disease
C. Peters, J. Mjösberg, T. Cupedo, H. Spits (Amsterdam, Rotterdam, NL)

16. Differential effects of quercetin and rutin on rat macrophages
I. Romero-Calvo, C. Mascaraque, R. López Posadas, M.D. Suarez, A. Zarzuelo,
O. Martínez-Augustin, F. Sanchez de Medina (Granada, ES; Erlangen, DE)

17. Pathological angiogenesis as an integral morphological component of active
inflammatory bowel disease. Immunohistochemical study of endothelial cell
markers CD31 and CD34 in colonoscopic biopsies from adult patients
M.E. Sobaniec-Lotowska, J.M. Lotowska, S. Bockowska, U. Sulkowska, T. Szulzyk,
M. Baltaziak (Bialystok, PL)

18. MicroRNAs as disease markers and therapeutic targets in inflammatory bowel
diseases
(Amsterdam, NL)
19. Interleukin-17 stimulates the secretion of chemokines by primary intestinal fibroblasts
   F. van Dooren, P. Moerland, E. Vogels, S. Meisner, A. te Velde (Amsterdam, NL)

20. Analysing the role of mucosal mast cells inducing colitis-associated colorectal cancer (CRC)
    B. Weigmann, M. Stassen, C. Taube, M.F. Neurath (Erlangen, Mainz, DE)

21. ATG16L1 regulates immune responses through destabilization of the immunological synapse
    M. Wildenberg, C. Vos, S. Wolfkamp, M. Duijvestein, A. Verhaar, A. te Velde,
    G.R. van den Brink, D. Hommes (Amsterdam, Leiden, NL)

22. The importance of new serological markers of inflammatory bowel disease
    E. Yorulmaz, G. Adali, F. Akyuz, I. Tuncer, S. Kaymakoglu, G. Tasan, S. Gurses,
    M. Ayas (Istanbul, TR)

23. Prodromal irritable bowel syndrome may be responsible for delays in diagnosis in patients presenting with unrecognised Crohn’s disease and coeliac disease, but not ulcerative colitis
    S. Barratt, J.S. Leeds, K. Robinson, A. Lobo, M.E. McAlindon, D.S. Sanders
    (Sheffield, GB)

24. Mind or mesentery? Do the type, frequency and severity of reflux symptoms in patients with inflammatory bowel disease and coeliac disease shed light on their cause?
    S. Barratt, J.S. Leeds, K. Robinson, A. Lobo, M.E. McAlindon, D.S. Sanders
    (Sheffield, GB)

25. Characterization of colonic stricture and as a risk factor for colorectal carcinoma in patients with inflammatory bowel disease
    M. Basaranoglu, A. Sayilir, S. Kayacetin, E. Kayacetin (Ankara, TR)

26. Enterovesical fistula during Crohn’s disease
    N. Ben Mustapha, Z. Ben Ali, M. Serghini, H. Boussorra (Tunis, TN)

27. A meta-analysis of the involvement of renin-angiotensin system in the management of inflammatory bowel disease; Future perspectives and implications
    Y. Beyazit, A. Sayilir, B. Suvak, S. Torun, B.T. Demirel (Ankara, TR)

28. Primary sclerosing cholangitis is associated with pancolitis and not backwash ileitis
    K. Boonstra, K.J. van Erpecum, C.M.J. van Nieuwkerk, J.P.H. Drenth, A.C. Poen,
    B.J.M. Witteman, H.A.R.E. Tuynman, U. Beuers, C. Ponsioen (Amsterdam,
    Utrecht, Nijmegen, Zwolle, Ede, Alkmaar, NL)
29. Factors associated with high dose radiation in Crohn’s disease patients
   H. Boussorra, M. Fekih, K. Nouira, N. Ben Mustapha, L. Kallel, S. Matri, J. Boubaker, A. Filali (Tunis, TN)

30. A Crohn’s smoking cessation programme
   F. Bredin, M. Parkes, T. Goodwin (Cambridge, GB)

31. The effect of steroids on the expression of Wnt pathway inhibitors in patients with longstanding ulcerative colitis
   G. Caldwell, C. Jones, G. Matthews, I. Williams, T. Iqbal, D. Morton (Birmingham, GB)

32. Efficacy and safety of thiopurines in the treatment of inflammatory bowel disease (IBD)
   G. Costantino, F. Furfaro, A. Alibrandi, W. Fries (Messina, IT)

33. Clinical validation of simple endoscopic score for Crohn’s disease (SES-CD) in children
   M. Dadalski, J. Kierkus, G. Oracz, A. Wegner, J. Ryzko (Warsaw, PL)

34. White cell apheresis induces clinical and IBD-Q remission in patients with severe refractory ulcerative colitis
   C. Ford, R. Preedy, D. Venkama, P. Premchand (Essex, GB)

35. Hemophagocytic lymphohistiocytic (HLH) syndrome in IBD patients treated with thiopurines - A case series
   W. Fries, A. Belvedere, A. Allegra, A. Cascio (Messina, IT)

36. Experiences with long-term infliximab therapy in patients with Crohn’s disease: Treatment beyond a 100 months
   K. Gecse, E. Eshuis, C. Peters, T. Molnár, C. Ponsioen, P. Fockens, G. D’Haens (Szeged, HU; Amsterdam, NL)

37. Safety of Infliximab treatment in patients with stenosing forms of Crohn’s disease
   C. Gheorghe, R. Vadan, L.S. Gheorghe, S. Suciu, M. Diculescu (Bucharest, RO)

38. Cutaneous complications in Crohn’s disease - A therapeutic challenge
   L.S. Gheorghe, S. Suciu, R. Vadan, B. Cotruta, I. Bancila, C. Gheorghe (Bucharest, RO)

39. Infliximab data in Serbia. Multicentric prospective data from five referral centers
   V. Gligorijevic, D. Bojic, M. Protic, B. Bojic, D. Tarabar, N. Mijalkovic, A. Nagorni, L. Hadnadzev, N. Jojic (Belgrade, Nis, Novi Sad, RS)

40. Predictors of therapeutic response to prednisolone in patients with severe attack of ulcerative colitis
   A. Golovenko, T.L. Mikhailova, I.L. Khalif, O. Golovenko (Moscow, RU)
41. Patients with active Crohn’s disease have a low possibility to successfully complete capsule endoscopy

42. Influence of the frequency of outpatient examinations of patients with ulcerative colitis on the number and length of relapses
   M. Konecny, V. Prochazka (Olomouc, CZ)

43. Ulcerative colitis in remission and irritable bowel syndrome - Is any relation?
   C. Mihai, B. Mihai, A. Hafez Khawajeh, G. Dumitrescu, C. Cijevschi Prelipcean (Iasi, RO)

44. A nurse led, gastroenterology telephone clinic is a cost-effective method of reducing outpatient follow-up appointments and reducing the time patients wait for results
   V. Morgan, G. Parkes, D. Suri (London, GB)

45. Serum neutrophil gelatinase-associated lipocalin (NGAL) concentration is highly elevated in children with inflammatory bowel disease
   A. Ostafin, R. Knitko, D. Dudka, J. Kierkus, A. Wierzbicka, P. Socha, M. Teisseyre, R.M. Janas (Warsaw, PL)

46. Real-life experience with adalimumab in 427 Cohn’s patients in The Netherlands
   C. Peters, E. Eshuis, F. Toxopeüs, A. van Bodegraven, P. Stokkers, H.A.R.E. Tuynman, C. Ponsioen (Amsterdam, Alkmaar, NL)

47. Prevalence of gastric pathology in Crohn’s disease patients
   R. Prijic, M. Crncevic Urek, S. Cukovic-Cavka, J. Jakic-Razumovic, Z. Krznaric, A. Kunovic, B. Vucelic (Zagreb, HR)

48. Pancreatic insufficiency in ulcerative colitis; Assessment by fecal elastase-1
   N. Rustemovic, S. Cukovic-Cavka, M. Brinar, D. Rogic, B. Vucelic (Zagreb, HR)

49. Evaluation of thymosin α-1, immunoglobulin E and adiponectin in children with inflammatory bowel disease

50. Pathological diagnosis of pediatric inflammatory bowel diseases. Ten years activity in a referral center experience
   A. Sonzogni, M. Cheli (Bergamo, IT)
51. Iron deficiency anemia versus anemia of chronic diseases in patients with ulcerative colitis
A. Stadnicki, B. Bojko, M. Maciazek-Jurczyk, I. Stadnicka, E.I. Klimacka-Nawrot, J. Kurek (Sosnowiec, Katowice, Jaworzno, PL)

52. Serum adenosine deaminase as a predictor of disease activity in patients with ulcerative colitis
B. Suvak, Y. Beyazit, A. Tas, S. Koklu (Ankara, TR)

53. Long term safety and efficacy of H1N1 vaccine in a single-center cohort of IBD patients treated with immunomodulators and/or anti-TNFα biologics

54. Maintenance vs. intermittent therapy in clinical and endoscopic remission in non-extensive ulcerative colitis
S. Turcan, V.-T. Dumbrava (Chisinau, MD)

55. Dysplasia and the risk for colorectal cancer in ulcerative colitis
V. Vacariu, C. Banciu, I. Romosan, N. Tudose, E. Potencz (Timisoara, RO)

56. Ileostomy effectiveness in the treatment of the patients with the severe form of perianal Crohn’s disease
A. Vardanyan, I.L. Khalif, V. Kashnikov, T.L. Mikhailova, K. Bolikhov (Moscow, RU)

57. Improvement in biomarkers of bone formation during 54-week infliximab therapy in pediatric patients with Crohn’s disease
G. Veres, D. Szabó, K. Molnár, É. Kövári, K. Müller, A. Dezsöfi, A. Arató (Budapest, HU)

58. Infliximab induces regulatory macrophages in responders but not in non-responders

59. Enhanced induction of regulatory macrophages upon azathioprine/infliximab combination treatment in vitro
C. Vos, A. Levin, M. Duijvestein, M. Wildenberg, A. Verhaar, G.R. van den Brink, D. Hommes (Leiden, Amsterdam, NL)

60. Induction therapy with three doses of infliximab in Polish children with Crohn’s disease
A. Wegner, J. Kierkus, M. Dadalski, G. Oracz, J. Ryzko (Warsaw, PL)

61. Seasonal variation by the onset of symptoms and health care seeking behaviour in 282 patients with inflammatory bowel disease (IBD): A single center experience from Turkey
M. Yavuz, A. Sayilir, A. Erbag, E. Kayacetin, M. Basaranoglu (Ankara, TR)
List of Speakers, Moderators and Scientific Organizers

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During the Falk Symposium 179

Sheraton Brussels Hotel
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Opening Hours:
Thursday, September 29, 2011 16.00 – 21.00 h
Friday, September 30, 2011 8.00 – 18.00 h
Saturday, October 1, 2011 8.00 – 18.40 h

Congress Fees

Scientific program of the Falk Symposium 179
Students and residents

€ 200,-
€ 100,-

* * * OR * * *

Day ticket
Students and residents

€ 120,-
€ 60,-

The congress fees include:
- Welcome Evening on September 29, 2011
- Refreshments during coffee breaks
- Lunch on September 30 and October 1, 2011
- A copy of the abstract volume

Admission to Scientific Events

For admission to scientific events your name badge should be clearly visible.
Congress Report
The official congress report of the Falk Symposium 179 “Revisiting IBD Management: Dogmas to be Challenged” will be published in English in the first half of 2012 by Karger Publishers, Basel, Switzerland. Orders for this book at a reduced subscription price of € 35,- can be placed at the Congress Office during the congress in Brussels.

Congress Short Report
The congress short report of the Falk Symposium 179 will be published by the Falk Foundation e.V. with number FSK 179 in the first half on 2012.

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