

What's new in Gastrointestinal 6

Some of the new information and major changes included in *Therapeutic Guidelines: Gastrointestinal*, version 6.

All topics in Gastrointestinal guidelines, version 6, were discussed in detail by the expert writing group and updated.

The management of **hepatitis C** is rapidly changing; peginterferon plus ribavirin dual therapy is being replaced by oral direct-acting antiviral regimens that offer higher cure rates, improved tolerability and easier administration. An overview of the current landscape of hepatitis C management is provided (including pretreatment considerations and patient groups that require specialist referral), along with some of the antiviral regimens that will be used in the new era of hepatitis C treatment.

The **advanced liver disease** topic includes an expanded overview, with information about assessing bleeding risk, specific considerations following surgery, and potential causes of renal impairment in patients with advanced liver disease. The difficulty in predicting bleeding risk in patients with cirrhosis is further explained in a new section on portal vein thrombosis.

New sections provide an overview of **Wilson disease** and **IgG₄-related disease**.

The **irritable bowel syndrome** (IBS) section has been comprehensively reviewed, with the addition of information about the role of the gut microbiota in IBS, potential global symptom reduction with antidepressants, and a new table detailing the types of fibre and their role in IBS.

Food intolerance is a common complaint in general practice. A new section provides information on lactose intolerance, FODMAP intolerance, noncoeliac gluten intolerance, food chemical sensitivity and psychological contributions to food intolerance. Appropriate diets for investigation and management of food intolerances are outlined.

Advice on the management of **gastro-oesophageal reflux** has been revised, with an emphasis on stepping down to maintenance PPI therapy once symptoms have improved. Information on the increasingly recognised allergic disorder **eosinophilic oesophagitis** includes advice on dietary therapy and the use of topical corticosteroids.

The **nausea and vomiting** topic highlights the importance of patient assessment and the need to consider the clinical context of the patient. Recommendations for nausea and vomiting during pregnancy and postoperative nausea and vomiting have been revised and simplified.

Guidance on the management of **acute pancreatitis** includes information about investigations, fluid administration and feeding. A new section on **pancreatic exocrine insufficiency** outlines diagnosis and the starting doses of pancreatic enzyme supplements.

The **short bowel syndrome** topic now includes information about nutrition support, drug therapy, and appropriate oral fluid replacement to avoid dehydration (including a recipe for St Mark's mixture).

New sections on malnutrition and parenteral nutrition have been added to the **nutrition support** topic, along with a table of risk factors for refeeding syndrome.

Advice on appropriate dietary restrictions and bowel preparation for patients **preparing for a colonoscopy** is provided, as these are crucial for a successful colonoscopy.

Readers with access to *eTG complete* can print out handy quick-reference tables of:

- antiemetic drugs for acute nausea and vomiting
- common patterns of abnormal liver biochemistry, their potential causes and appropriate further investigations
- management of enteral feeding-tube and site problems
- dosing and administration of parenteral iron preparations.

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