

# Preface

“We are what we eat” is a common saying, yet not always understood and applied, and not many of us know that the delivery of proper nutrients is necessary for maintenance of homeostasis and functioning of the entire body. On the other hand, only recently the gastrointestinal (GI) tract has emerged as a crucial system, intertwining structurally and functionally with the central and peripheral nervous as well as immune systems, and several others. Therefore, not only diet, but also lifestyle and surrounding environment may influence the GI tract and related systems.

In the recent years, functional and inflammatory diseases of the GI tract have been taking their toll and the number of their cases is significantly increasing, what triggers the need for extensive medical care. In case of irritable bowel syndrome (IBS), its management constitutes 25–50 % of the entire gastroenterology outpatients workload. As for inflammatory bowel disease (IBD), the incidence of Crohn’s disease (CD) is estimated at 5 per 100,000 people per year and the prevalence is 40–50 per 100,000 people in the Western and Northern Europe. The incidence and prevalence of CD are maintained at a stable level in developed countries, whereas in developing areas these rates are constantly growing. The incidence rate of ulcerative colitis (UC) is about 10 per 100,000 people.

Furthermore, the average age of onset of the GI tract diseases becomes a serious concern. Approximately 25 % of IBD cases are diagnosed in the first two decades of patient’s life, especially in childhood (age 13–18). The highest incidence of UC occurs already between the ages of 20 and 40.

Alarmingly, only the minority of patients (e.g., one-third in the case of IBS) seek advice from a general practitioner; many do not consider their symptoms serious enough to consult the doctor and usually seek different treatment modalities, not always acceptable from the medical point of view or efficient. Moreover, only 20 % of patients—when they do not respond to conventional treatment—are referred to see a gastroenterologist. Finally, IBS and IBD patients often look for medical information from the Internet, which does not necessarily provide the same quality of knowledge as official brochures, books, or medical professionals.

Through this book, we hope to change the current situation for the patient and for the doctor. The book has been prepared by professionals in basic and clinical gastroenterology, therefore the information provided is up to date and of highest quality. Moreover, we focus on both, the patient and the doctor. We hope that through this book we will encourage a new approach to the management of the GI tract diseases not only by educating the patient and the doctor, but also showing that the collaboration between them is beneficial for better diagnosis and cure.

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Introduction to Gastrointestinal Diseases Vol. 1

Flechner, J. (Ed.)

2017, XII, 139 p. 11 illus., 9 illus. in color., Hardcover

ISBN: 978-3-319-49015-1