Introduction to volume 2, fourth issue

Dear Colleagues,

Articles in the current issue of the *JIG* address several important questions related to gastrointestinal interventions. Which patients with dilated common bile and/or pancreatic ducts have positive findings on EUS? Is the use of prophylactic hemoclips in the endoscopic resection of large pedunculated polyps useful - a prospective and randomized study? Does the urgency of endoscopic retrograde cholangiopancreatography (ercp)/percutaneous biliary drainage (pbd) impact mortality and disease related complications in ascending cholangitis (deim-i study)? A number of other important interventional issues are addressed: successful management of recurrent biliary colic caused by pancreatic stent migration after Whipple procedure, role of endoscopic ultrasound-guided fine needle aspiration (eus-fna) for the diagnosis of intra-abdominal lymphadenopathy of unknown origin, combination of snare polypectomy and apc therapy for prolapsing common bile duct adenoma, feasibility and safety of magnetic-controlled capsule endoscopy system in examination of human

stomach: a pilot study in healthy volunteers, the experience of a pelvic floor center in short term results of sacral nerve stimulation in the treatment of fecal incontinence, effectiveness of a simplified "patient friendly" split dose polyethylene glycol colonoscopy prep in Veterans Health Administration patients, and gastroduodenal stents are associated with more durable patency as compared to percutaneous endoscopic gastrojejunostomy in the palliation of malignant gastric outlet obstruction. Several interesting case series and case reports address valuable experience in interventional gastroenterology: endoscopic therapy for significant gastric outlet obstruction caused by a small pancreatic pseudocyst with a unique shape and location, a case of mesenteric ischemia secondary to Fibromuscular Dysplasia (FMD) with a positive outcome after intervention, and successful endoscopic treatment of iatrogenic biloma as a complication of endosonography-guided hepaticogastrostomy. While the majority of the articles originate from the United States, authors from Spain, Italy, Thailand and China are represented, attesting to the international support for the Journal.

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