Symposium 214

IBD: From Pathophysiology to Personalized Medicine

March 29–30, 2019

Examination Schools Oxford
Oxford, Great Britain

Program

Awarded with 12 CME credits

12 credit hours (CME) have been awarded for the Symposium 214 by the European Union of Medical Specialists (UEMS).

Preface

We, the organizing committee, are pleased to invite you to the "IBD: From Pathophysiology to Personalized Medicine" Symposium that will take place in Oxford, UK. It is a great pleasure to have the opportunity to hold a Falk IBD symposium in Oxford for the first time since the establishment of this series of international conferences in 1967. This city is known worldwide as the home of the University of Oxford, the oldest university in the English-speaking world, with its outstanding academic facilities.

Inflammatory bowel diseases (IBD: Crohn´s disease, ulcerative colitis) are relapsing inflammatory disorders of the gastrointestinal tract. They have been increasing in prevalence over several decades in the 'Western world', but more recently this increase has turned almost global. Crohn's disease and ulcerative colitis are characterized by chronic intestinal inflammation leading to structural and functional damage of the intestine as well as to complications such as fibrosis, stenosis, fistulas and colitis-associated neoplasias. Despite numerous advances, the etiology of IBD remains largely enigmatic and still poses many intriguing questions.

The Symposium 214 "IBD: From Pathophysiology to Personalized Medicine" will aim at providing new insights into the complex pathophysiology of IBD. In the first part of the Symposium, we will discuss the role of genetic and environmental factors as well as novel concepts on microbial and host factors for disease development and chronicity. Particular attention will be paid to the emerging interrelated role of microbiota and host cells and to the function of immune sensing in chronic intestinal inflammation. In addition, recent findings on the role of innate and adaptive immune mechanisms in IBD pathophysiology will be presented. We expect that an in-depth understanding of the pathophysiology of IBD will guide the path towards novel therapeutic strategies.

In the second part of the Symposium, we will focus on new translational concepts for IBD therapy that are based on recent pathophysiological findings. Current IBD research aims at developing selective and specific drugs, which target pathophysiologically important pathways, while at the same time not compromising the patient's immune competence. This concept remains a major challenge given the heterogeneity of IBD pathophysiology. However, as multiple new biological agents and small molecules are in clinical trials or have been approved for clinical therapy, it is also essential to optimize treatment of IBD patients. Thus, we will discuss the role of new and established drugs as well as concepts and markers for individualized therapeutic approaches and personalized medicine in IBD. In this context, we will also highlight the rapid evolution of high-throughput technologies and different -omics for data-driven studies in precision medicine.

We have invited world-leading gastroenterologists and scientists to discuss their latest findings on IBD pathophysiology and therapy. We encourage young researchers to present their own scientific data as posters and to discuss their results with IBD experts. Furthermore, we will give four young researchers with the best submitted abstracts the opportunity to present their findings as oral presentations.

We are looking forward to seeing you in Oxford.

Markus F. Neurath Arthur Kaser Fiona Powrie

Symposium 214

IBD: From Pathophysiology to Personalized Medicine

March 29–30, 2019

Examination Schools
Oxford, Great Britain

Start of Registration:
Thursday, March 28, 2019
16.00 - 21.00 h
at the congress office

Setting Up of Poster Session:
Thursday, March 28, 2019
16.00 - 21.00 h

Congress Venue:
Examination Schools
75-81, High Street
Oxford OX1 4BG
Great Britain

Symposium 214 is organized by Falk Foundation e.V.

Scientific Organization:
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Scientific Co-Organization:
A. Kaser, Cambridge (Great Britain)
F. Powrie, Oxford (Great Britain)

Official Language:
English

Friday, March 29, 2019

9.00	Welcome	M.F. Neurath A. Kaser F. Powrie

Session I
IBD pathophysiology and genetics

Chair: G. Hold, Sydney; N. Prescott, London

9.10	Poly-genetics in IBD: An overview	M. Parkes, Cambridge
9.30	Biomarkers and genetic approaches	L. Jostins, Oxford
9.50	How genes shape the microflora	P. Rosenstiel, Kiel
10.10	Microbes and environmental factors	H. Sokol, Paris
10.30	**Coffee break with poster session**	

Session II
Epithelial cell biology and stromal cells in IBD

Chair: A. Kaser, Cambridge; K. Maloy, Oxford

11.00	Type I interferon signaling and antimicrobial peptides	H. Tilg, Innsbruck
11.20	Subtypes of epithelial cells and their function	A. Simmons, Oxford
11.40	Regulation of cell death in gut homeostasis and inflammation	C. Becker, Erlangen
12.00	Endoplasmatic reticulum stress in intestinal inflammation	J. Grootjans, Amsterdam
12.20	**Lunch break with poster session**	

Friday, March 29, 2019

Session III
Innate immunity

Chair: A. Geremia, Oxford; S. Ghosh, Birmingham

14.00	How nutrition and the maternal microbiota shape the innate immune system	A. Macpherson, Bern
14.20	Interleukin-22 protects intestinal stem cells against genotoxic stress	A. Diefenbach, Berlin
14.40	Dendritic cells in gut homeostasis and inflammation	E.J. Villablanca, Stockholm
15.00	Immunometabolism in Crohn's disease	Z. Cader, Cambridge
15.20	**Coffee break with poster session**	

Session IV
Adaptive immunity

Chair: C. Abraham, New Haven; M.C. Fantini, Rome

15.50	Regulation of intestinal autoimmune responses: Lessons from human monogenic diseases	N. Cerf-Bensussan, Paris
16.10	Role of B and T cells in intestinal homeostasis and inflammation	O. Pabst, Aachen
16.30	Transcriptomic signature of CD8+ T cell exhaustion in IBD	J. Lee, Cambridge
16.50	Host microbe interactions in the intestine: New therapeutic strategies for the treatment of immune-mediated diseases	F. Powrie, Oxford

Special Session

Chair: S. Huber, Hamburg; A.J.M. Watson, Norwich

17.10	**Oral Poster presentation 1** – Gene expression signatures in Crohn's Disease and other fibrotic disorders	E. Filidou, Alexandroupolis
17.20	**Oral Poster presentation 2** – CRC development is driven by STAT3 activation in cancer fibroblasts	C. Kersten, Erlangen
17.30	**Special Lecture** From genetic discovery to precision IBD: The road ahead	J. Cho, New York
18.00	**Networking with light refreshments**	

Saturday, March 30, 2019

Session V
Immune sensing and microbiota

Chair: M. Bunders, Hamburg; T.T. MacDonald, London

9.00	Microbe-derived factors as regulators of the mucosal immune system	C. Danne, Jouy-en-Josas
9.20	Exposure to microbiota early in life protects from inflammatory pathologies later in life	G. Eberl, Paris
9.40	Precision editing of the gut microbiota through host factors	S.E. Winter, Dallas
10.00	Regulation of inflammasome responses	E. Latz, Bonn
10.20	**Oral poster presentation 3** Macrophage IL-10 signaling is required for the therapeutic efficacy of anti-TNF in IBD	P.J. Koelink, Amsterdam
10.30	**Oral poster presentation 4** Predicting endoscopic response in ustekinumab-treated patients with Crohn's disease using multi-omics	B. Verstockt, Leuven
10.40	**Coffee break with poster session**	

Session VI
Optimizing clinical therapy: A look at IBD and beyond

Chair: P. Borralho Nunes, Lisbon; G.J. Mantzaris, Athens

11.10	Optimizing classical immunosuppressive agents in IBD	M.C. Dubinsky, New York
11.30	Optimizing anti-TNF therapy in IBD	J.-F. Colombel, New York
11.50	Optimizing clinical therapy with new IL-12 and IL-23 cytokine blockers	B. Siegmund, Berlin
12.10	Optimizing clinical therapy in rheumatoid arthritis	G. Schett, Erlangen
12.30	**Lunch break with poster session**	

Saturday, March 30, 2019

Session VII
Emerging clinical therapies in IBD: Efficacy and safety

Chair: I. Atreya, Erlangen; T. Kühbacher, Hamburg

13.30	Fecal transplant and bacteriotherapy	A.Hart, London
13.50	Targeting immune cell: Integrin and JAK blockers	B.G. Feagan, Ontario
14.10	**Presentation of Poster Awards**	M.F. Neurath A. Kaser F. Powrie
14.30	Targeting immune cell: Integrin and JAK blockers	G. van Assche, Leuven
14.50	Anti-fibrotic agents in IBD	G. Rogler, Zurich
15.10	**Coffee break with poster session**	

Session VIII
Personalized medicine: Concepts in IBD

Chair: M.F. Neurath, Erlangen; J. Satsangi, Oxford

15.40	Surgery in IBD: How to identify the right patient?	S. Fichtner-Feigl, Freiburg
16.00	Mono-genetics: Very early onset IBD	H. Uhlig, Oxford
16.20	Immunological markers and molecular endoscopy	R. Atreya, Erlangen
16.40	**State-of-the-Art Lecture:** Individualized management of IBD: A look into the future	G. D'Haens, Amsterdam
17.10	**Closing remarks**	M.F. Neurath A. Kaser F. Powrie

Posterliste

1. Validation of the CUCQ questionnaire with stoma extension in patients with acute ulcerative colitis in the CONSTRUCT trial
   L. Alrubaiy, A. Al-Rubaye, H. Hutchings, A. Watkins, W.-Y. Cheung, A.C. Seagrove, I.T. Russell, J. Williams (Swansea, GB; Umea, SE)
2. Infliximab or ciclosporin for steroid-resistant acute severe ulcerative colitis? Results of a pragmatic randomised trial and economic evaluation (CONSTRUCT)
   L. Alrubaiy, J. Williams, A. Al-Rubaye, I. Arnott, C. Clement, D. Cohen, J.N. Gordon, A.B. Hawthorne, M. Hilton, H. Hutchings, A.U. Jawhari, M. Longo, J. Mansfield, J.M. Morgan, F. Rapport, A.C. Seagrove, S. Sebastian, I. Shaw, S.P.L. Travis, A. Watkins (Swansea, GB; Umea, SE)
3. Crohn's and ulcerative colitis questionnaire-8 (CUCQ-8), a valid and quick quality of life measure in IBD
   A. Al-Rubaye, L. Alrubaiy, P. Dodds, H. Hutchings, J. Williams (Umea, SE; Swansea, GB)
4. Clinicians' knowledge about the ionizing radiation of the common investigations used in inflammatory bowel disease
   A. Al-Rubaye, L. Alrubaiy, S. Al-Rubaye, C.L. Ch'ng (Umea, SE; Swansea, London, GB)
5. Can the inflammatory bowel disease biologics registry lead to improved quality of care?
   A. Al-Rubaye, L. Alrubaiy, H. Hutchings, J. Williams (Umea, SE; Swansea, Cardiff, GB)
6. Systematic review of the clinical disease severity indices for inflammatory bowel disease
   A. Al-Rubaye, I. Rikaby, L. Alrubaiy, M. Sageer, H. Hutchings, J. Williams (Umea, SE; Swansea, GB; Burlington, US)
7. Immunomodulatory interactions between cyclin-dependent kinase inhibitors (p21 and p21) and tumors suppressor gene p16 in patients with ulcerative colitis
   Y. Ananiev, M.V. Gulubova, R. Tenev, K. Ivanova, M. Hadzi (Stara Zagora, BG)
8.* An IL-1-dependent IL-23 inflammatory monocyte signature correlates with disease severity and treatment response in patients with inflammatory bowel disease
   D. Aschenbrenner, M. Quaranta, S. Banerjee, N. Ilott, J. Jansen, B.A. Steere, S. Ho, K. Cox, C.V. Arancibia-Carcamo, S.P.L. Travis, L.A. Denson, S. Kugathasan, J. Schmitz, S. Sansom, F. Powrie, H.H. Uhlig (Oxford, GB)
9. The hepatobiliary disorders in patients with IBD and their correction
   O. Baka, E. Manzhali, O.M. Plehutsa, N. Dynnyk, O. Potapov, O. Kalashnikov, O. Kosiukhno, O. Perekhrestenko, I. Todurov (Kyiv, UA)

10. Autoimmune sclerosing cholangitis and ulcerative colitis in 6-year-old boy – A case report
K. Baraba Dekanic, G. Palcevski (Rijeka, HR)
11. Dose-dependent differential effects of vedolizumab therapy on adhesion of regulatory and effector T cells
E. Becker, I. Atreya, R. Atreya, M.F. Neurath, S. Zundler (Erlangen, DE)
12. A blood-based prognostic biomarker in inflammatory bowel disease
D. Biasci, J.C. Lee, N.M. Noor, D.R. Pombal, N. Lewis, T. Ahmad, A. Hart, M. Parkes, E.F. McKinney, P.A. Lyons, K.G.C. Smith (Cambridge, Nottingham, Exeter, Harrow, GB)
13.* Therapeutic fecal microbiota transplantation controls intestinal inflammation through IL-10 secretion by immune cells
C. Burrello, F. Garavaglia , F.M. Cribiu, G. Ercoli, G. Lopez, J. Troisi, S.A. Colucci, S. Guglietta, S. Carloni, S. Guglielmetti, V. Taverniti, G. Nizzoli, S. Bosari, F. Caprioli, M. Rescigno, F. Facciotti (Milan, Salerno, IT)
14. Vaccination strategies for IBD patients
A. Centritto, A. Squeri, A. Sitibondo, G. Costantino, A. Belvedere, V. Pisana, A. Viola, F. Costa, R. Squeri, W. Fries (Messina, IT)
15. Inflammatory bowel disease patients with detectable anti-infliximab antibodies have a high risk of acute infusion reactions to infliximab
A.M. Chiosa, A. Savin, A.-M. Leustean, A.G. Otea, C. Mihai (Iasi, RO)
16. STAT2 signals control the pathogenesis of colitis and intestinal wound healing in mice
M.T. Chiriac, Z. Hracsko, M.F. Neurath (Erlangen, DE)
17. Inflammatory bowel disease and cardiovascular manifestations – Clinical case
A. Clim, R. Nemteanu, C. Gorincioi, A. Plesa (Iasi, RO)
18. Evaluation of subclinical myocardial damage in patients with inflammatory bowel disease on treatment with biologics
G. Costantino, G. Mandraffino, S. Tomeo, M. Scolaro, A. Sitibondo, G. Di Bella, W. Fries (Messina, IT)
19. Fecal calprotectin, is it a good tool to assess response to treatment with TNF inhibitor?
O. Daboussi, M. Luwawu, A. Benkhemmar, A. Herber (Le Coudray, FR)
20. Correlation between levels of C-reactive protein and clinical activity in Crohn's disease
O. Daboussi, M. Luwawu, A. Benkhemmar, A. Herber (Le Coudray, FR)
21. The transcriptomic signature of IL-23 treated laminar propria mononuclear cells is significantly enriched for genes in the Th17 pathway and is overexpressed in active UC compared to inactive and healthy controls
J. Digby-Bell, P. Pavlidis, U. Niazi, Z. Kassam, M. Saqi, E. Perucha, N. Prescott, N. Powell (London, GB)

22.* GPR35 engages with the sodium potassium pump and promotes intestinal epithelial cell proliferation and oncogenic signalling
J.E. Elias, G. Schneditz, E. Pagano, M.Z. Cader, S. Saveljeva, K. Long, S. Mukhopadhyay, M. Arasteh, T.D. Lawley, G. Dougan, A. Bassett, T.H. Karlsen, A. Kaser, N.C. Kaneider (Cambridge, GB; Oslo, NO)

23. Common gene expression signature between Crohn's disease and other fibrotic disorders reveals enhanced fibrotic pathophysiological pathways in terminal ileum
E. Filidou, N. Dovrolis, L. Kandilogiannakis, K. Arvanitidis, G. Kolios (Alexandroupolis, GR)

24. The effects of the remission maintenance therapy in inflammatory bowel diseases on bone mineral density
A.-V. Genunche-Dumitrescu, D. Badea, M. Badea, P. Mitrut, D. Duta, C.I. Deliu, O.M. Diaconu, A. Badea (Craiova, RO)

25. JAK1/3 inhibitor tofacitinib suppresses chronic intestinal inflammation and prolongs epithelial wound healing
K. Gerlach, V. Popp, L. Offensperger, K. Lechner, R. Atreya, M.F. Neurath, B. Weigmann (Erlangen, DE)

26. Daily enteral nutrition supplements succesfully maintain long-term remission in Crohn's disease: A meta-analysis
S. Ghosal, S. Ghosal (Stoke on Trent, Newcastle under Lyme, GB)

27. Crohn's disease and active pulmonary tuberculosis – A clinical challenge
C. Gorincioi, R. Nemteanu, A. Clim, A. Plesa (Iasi, RO)

28. Ulcerative colitis patients show a decreased frequency of circulating GPR15+ innate lymphoid cells
V. Greif, A. Schulz-Kuhnt, J. Weghorn, M. Döbrönti, R. Atreya, S. Wirtz, S. Zundler, M.F. Neurath, I. Atreya (Erlangen, DE)

29. Ulcerative colitis: Presentation of 21 observations in a Sub-Saharan Africa hospital
M.N. Gueye, S.D. Niang, D. Diouf, S. Diallo, M.L. Bassene, D. Dia, M. Mbengue (Dakar, SN)

30. Is misdiagnosis of Crohn's disease a ulcerative colitis still possible?
O. Gur, E. Saritas Yüksel (Izmir, TR)

31. Colonization by Escherichia coli Nissle 1917 ameliorates DSS-induced experimental colitis in gnotobiotic mouse model
P. Hermanova, D. Srutkova, H. Tlaskalova-Hogenova, H. Kozakova, M. Schwarzer, T. Hudcovic (Prague, CZ)

32. Thiopurine adverse events in patients with inflammatory bowel disease in the United Kingdom – IBD BioResource cohort
Y.Y. Hong, D.A. Withanachchi, R. Shawky, M. Parkes (Cambridge, GB)

33. Efficacy of thiopurine monotherapy in the UK Inflammatory Bowel Disease BioResource cohort
Y.Y. Hong, L. Pele, R. Simpkins, C. Thorbinson, D. Francis, R. Shawky, M. Parkes (Cambridge, GB)

34. Prophylactic effect of Clostridium tyrobutyricum on the development of acute intestinal inflammation induced by dextran sulfate sodium. Differential regulation of TNF-α and IL-18 in BALB/C and SCID mice
T. Hudcovic, P. Hermanova, J. Kolinska, J. Klepetar, R. Stepankova, T. Rezanka, D. Srutkova, M. Schwarzer, V. Erban, Z. Du, J. Wells, T. Hrncir, H. Tlaskalova-Hogenova, H. Kozakova (Prague, CZ; Wageningen, NL)
35. Inflammatory infiltration of CD15-positive cells in endoscopic material of ulcerative colitis and Crohn's disease patients
K. Jakubowska, M. Koda, W. Famulski, L. Kanczuga-Koda, M. Grudzinska, N. Rogoz (Bialystok, Brzozow, PL)
36. Contrast-enhanced µCT for visualizing and evaluating murine intestinal inflammation
D. Jung, R. Heiss, V. Kramer, O.-M. Thoma, A. Regensburger, W. Rascher, M. Uder, M.F. Neurath, F. Knieling, M. Waldner (Erlangen, DE)
37. Pathophysiological roles of plasmacytoid dendritic cell migrating to colonic isolated lymphoid follicles in a murine experimental colitis
M. Kadowaki, Y. Zhang, T. Yamamoto (Toyama, JP)
38. Colorectal cancer development is driven by STAT 3 activation through IL-6 and IL-11 in cancer-associated fibroblasts and correlates with prognosis of CRC patients
C. Kersten, K. Scheibe, A. Schmied, M.F. Neurath, C. Neufert (Erlangen, DE)
39. Dynamics of the level of cytokines tissue of the intestinal mucosa after administration of infliximab and mesenchymal stromal cells
O. Knyazev, A. Kagramanova, A. Lishchinskaya, A. Babayan, I. Trubitcyna, D. Kulakov, M. Zvyaglova, A. Konoplyannikov, A. Parfenov (Moscow, Obninsk, RU)
40. The effectiveness of combination therapy mesenchymal stromal cells and certolizumab pegol in perianal lesions in Crohn's disease
O. Knyazev, A. Kagramanova, A. Lishchinskaya, D. Kulakov, A. Babayan (Moscow, RU)
41. Macrophage IL-10 signaling is required for the therapeutic efficacy of anti-TNF in IBD
P. Koelink, F.M. Bloemendaal, B. Li, L. Westera, E.W.M. Vogels, M. van Roest, A.K. Gloudemans, A.B. van't Wout, H. Korf, S. Vermeire, C.P. Peters, A.A. te Velde, C.Y. Ponsioen, G. D'Haens, J.S. Verbeek, T.L. Geiger, M.E. Wildenberg, G.R. van den Brink (Amsterdam, NL; Memphis, US; Leiden, NL; Leuven, BE)
42. Protective effect of Bifidobacterium longum spp. longum on the development of DSS-induced colitis in mice is strictly strain dependent
H. Kozakova, D. Srutkova, M. Schwarzer, T. Hudkovic, Z. Zakostelska, V. Drab, A. Spanova, B. Rittich, I. Schabussova (Novy Hradek, Prague, Brno, CZ; Vienna, AT)

43. The functional role of VEGF-R in CD4+ T cells during the pathogenesis of colorectal cancer
V. Kramer, B. Mencchicchi, O.M. Thoma, M.F. Neurath, M. Waldner (Erlangen, DE)
44. Advanced optical technologies for label-free analysis of microstructure and biochemistry in IBD tissues ex vivo and in vivo
L. Kreiß, A. Dilipkumar, O.M. Thoma, P. Longequeue, J. Patankar, M. Leppkes, M. Hohmann, O. Friedrich, M. Waldner, S. Schürmann (Erlangen, DE)
45. Refractory Clostridium difficile infection in patient with ulcerative colitis
I. Krznaric-Zrnic, M. Abram, D. Stimac, B. Mijandrusic Sincic, S. Milic (Rijeka, HR)
46. Protective role of the Tec kinase ITK in the pathogenesis of inflammatory bowel disease
K. Lechner, B. Weigmann, M.F. Neurath (Erlangen, DE)
47. An exceptional cause of drug-induced inflammatory bowel disease – Ixekizumab
A.-M. Leustean, A. Lupascu, A. Cucos, M. Danciu, C. Cijevschi Prelipcean, A. Chiriac, A. Mihai (Iasi, RO)
48. Relation between TaqI polymorphism of VDR gene and Crohn‘s disease phenotype in Ukrainian patients
L. Lozynska, M. Lozynska, B. Tretiak (Lviv, UA)
49. Role of R702W and 3020insC mutations of NOD2 gene in the onset of Crohn‘s disease and colorectal cancer in patients from Ukraine
M. Lozynska, L. Lozynska, A. Plawski, R. Piniazhko, H. Makukh, R. Lozynskyy (Lviv, UA; Poznan, PL)
50.* Rac1-mediated maintenance of epithelial integrity in the gut
L. Martinez Sanchez, C. Brakebusch, M. Bergö, S. Tenzer, I. Atreya, M.F. Neurath, R. Lopez Posadas (Erlangen, Mainz, DE; Copenhagen, DK; Gothenburg, SE)
51. Infliximab therapy and tight disease monitoring during pregnancy for Crohn’s disease patient with high disease activity
V. Mokricka, P. Zalizko, I. Pukite, J. Sergejeva, J. Pokrotnieks, A. Pukitis (Riga, LV)
52. Host-microbial crosstalk in the pathogenesis of inflammation and cancer in primary sclerosing cholangitis
M. Neyazi, N. Ilott, S.P.L. Travis, C.V. Arancibia-Carcomo, F. Powrie, A. Geremia (Oxford, GB)
53. Common problems in pouchoscopy reports
B. Ogut Aydin, E. Saritas Yüksel (Izmir, TR)
54. miR-506 may play a role in a different phenotypic presentation of ulcerative colitis in patients with primary sclerosing cholangitis (PSC)
Dr. Ostrycharz, A. Kempinska-Podhorodecka, P. Milkiewicz, M. Milkiewicz (Szczecin, Warsaw, PL)

55. Diagnostic delay in Crohn‘s disease as a cause of complicated disease course – A case report
G. Palcevski, K. Baraba Dekanic (Rijeka, HR)

56. PRedicting Outcomes For Crohn’s dIsease using a moLecular biomarker: PROFILE trial recruitment update
M. Parkes, N.M. Noor, F. Dowling, A. Osmanska, S. Bond, L. Whitehead, S. Upponi, B. Brezina, J. De La Revilla Negro, P. Kinnon, A.P. Sandham , P.A. Lyons, E.F. McKinney, K.G.C. Smith, J.C. Lee (Cambridge, GB)

57. Germline de novo mutation in immune checkpoint regulator PTPN 2 causes very early onset autoimmune enteropathy by aberrant activation of JAK/ STAT pathway
M. Parlato, N. Qing, F. Charbit-Henrion, B. Begue, E. Martin, M. Maggioni, R. Duclaux-Loras, F. Rieux-Laucat, T.J. Molina, S. Latour, F. Ruemmele, F. Rodrigues-Lima, N. Cerf-Bensussan (Paris, FR; Milan, IT)

58.* Ruxolitinib as tailored treatment for severe enterocolitis caused by STAT3 gain of function mutation
M. Parlato, F. Charbit-Henrion, E. Abi Nader, B. Begue, N. Guegan, J. Bruneau, S. Khater, E. Macintyre, C. Picard, F. Rieux-Laucat, L. Le Bourhis, M. Allez, O. Goulet, C. Cellier, O. Hermine, N. Cerf-Bensussan, G. Malamut (Paris, FR)

59. Colitis on CT – Does this mean inflammatory bowel disease?
R.N. Patel, S. Ramakrishnan, E.-P. Veglio-Taylor, Z. Tariq, K. Besherdas (London, GB)

60.* The interleukin-22 transcriptional programme is activated in human colonic inflammation and associated to anti-TNFα primary non response in Crohn’s disease
P. Pavlidis, A. Tsakmaki, U. Niazi, J. Digby-Bell, G. Lombardi, B. Hayee, G. Bewick, N. Powell (London, GB)

61. The Inflammatory Bowel Disease (IBD) BioResource: Progressing from genetics to function and clinical translation in Crohn’s disease (CD) and ulcerative colitis (UC)
L. Pele, R. Simpkins, C. Thorbinson, D. Francis, R. Shawky, M. Parkes (Cambridge, GB)

62. Complex management of the patients with fistulating Crohn’s disease complicated with intraabdominal abscess
O.M. Plehutsa, O. Baka, N. Dynnyk, E. Manzhali, O. Prokhorenko, O. Potapov, O. Kalashnikov, S. Kosiukhno, O. Perekhrestenko, I. Todurov (Kyiv, UA)

63. QT interval prolongation and inflammatory bowel diseases
I.V. Popa, M. Dranga, I. Gavril, R.C. Popa, A.M. Chiosa, A. Savin, A.-G. Dorobat, I. Bejinariu, C. Mihai, C. Cijevschi Prelipcean (Iasi, RO)

64. Elderly patients with inflammatory bowel disease (IBD) are less likely to persist on anti-TNF therapy compared with younger patients. Data from the Sicilian Network for Inflammatory Bowel Diseases (SN-IBD)
S. Porcari, O. Fidanza, A. Alibrandi, S. Renna, M. Cappello, S. Siringo,

A. Privitera, A. Inserra, F. Mocciaro, G. Magri, A. Carroccio, N. Belluardo, C. Bertolami, S. Garufi, M. Ventimiglia, F. Macaluso, A. Viola, M. Cottone, A. Orlando, W. Fries (Messina, Palermo, Catania, Acireale, Sciacca, Vittoria, Caltanissetta, IT)

65. Tolerance of infliximab infusions without premedication in pediatric patients with inflammatory bowel disease
M. Rogalidou, T. Palianopoulos , E. Loutsi, K. Katsanos, D. Christodoulou, A. Iannou, V. Eythymiou, N. Chaliasos (Ioannina, GR)

66. CD4-positive T-helper cells in endoscopic material of ulcerative colitis and Crohn's disease patients
N. Rogoz, M. Koda, K. Jakubowska, W. Famulski, L. Kanszuga-Koda, M. Grudzinska (Brzozow, Bialystok, PL)

67.* Chronic intestinal inflammation induced by a viral cell death regulator
B. Ruder, V. Murtadak, M. Stürzl, S. Wirtz, U. Distler, S. Tenzer, M. Mahapatro, F.R. Greten, Y. Hu, M. F. Neurath, E. Cesarman, G. Ballon, C. Günther, C. Becker (Erlangen, Mainz, Frankfurt a. M., DE; Frederick, New York, Lake Succes, US)

68. Characteristics of inflammatory bowel disease patients with pseudopolyps
E. Saritas Yüksel, B. Ogut Aydin, F. Topal (Izmir, TR)

69. The study of key molecules of biological pathways of ageing in patients with ulcerative colitis and horizons of innovative therapy
I. Sarvilina (Rostov-on-Don, RU)

70.* Inhibiting interleukin-36 receptor signaling reduces fibrosis in chronic intestinal inflammation
K. Scheibe, C. Kersten, A. Schmied, M.F. Neurath, C. Neufert (Erlangen, DE)

71. The TLR9 agonist cobitolimod induces anti-inflammatory effects and balances the Th17/T-reg cell response in ulcerative colitis
H. Schmitt, J. Ulmschneider, U. Billmeier, C. Admyre, T. Knittel, A. Zargari, M.F. Neurath, R. Atreya (Erlangen, DE; Stockholm, SE)

72. GPR15/GPR15L as potential therapeutic targets in inflammatory bowel disease
S. Schramm, L. Dietz, E. Becker, M. Wiendl, I. Atreya, R. Atreya, M.F. Neurath, S. Zundler (Erlangen, DE)

73. Frequency and characteristics of extraintestinal manifestations in inflammatory bowel disease in children – Single-center experience
I. Senecic-Cala, E. Brezovac, M. Anicic, L. Omerza, D. Tjesic-Drinkovic, J. Vukovic (Zagreb, HR)

74. Risk factors for complicated disease in pediatric patients with inflammatory bowel disease
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75. Clostridium difficile infection in a patient with colitis ulcerosa
J. Sladoje, G. Pusicic, G. Lucic (Uzice, RS)

76. Lymphocyte activation gene (LAG)-3 on T cells is a potential therapeutic target in ulcerative colitis
S. Slevin, M. Tan, C. Lahiff, L.-M. Wang, B. Greenaway, K. Lynch, A. Geremia, S. Hughes, K. Leavens, K. Nevin, D. Krull, D.J.B. Marks, R. Tarzi, N. Srinivasan, S.P.L. Travis, C.V. Arancibia-Carcamo, S. Keshav (Oxford, GB)

77. Effect of dextran sulfate sodium treatment on germ-free mice colonized with mucosa-associated bacteria of ulcerative colitis patients
D. Srutkova, Z. Du, T. Hudcovic, J. Mrazek, H. Kozakova, M. Schwarzer, H. Tlaskalova-Hogenova, M. Kostovcik, M. Kverka (Novy Hradek, CZ)

78. Estrogen receptor alpha contributes to T-cell-mediated colitis by influencing T-cell functions
I. Starskaia, I. Mohammad, T. Nagy, J. Guo, E. Yatkin, K. Väänänen, W.T. Watford, Z. Chen (Turku, FI; Athens, US)

79.* IFN-STAT1-MLKL axis drives necroptosis during gastrointestinal inflammation and infection
I. Stolzer, B. Ruder, M.T. Chiriac, S. Wirtz, R. Atreya, M.F. Neurath, C. Becker, C. Günther (Erlangen, DE)

80. Determination of intestinal resection in patients with ulcerative colitis using intraoperative mini-γ-quantum differentiation of tissues
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81. The complexity of treatment tactics in patients with severe ulcerative colitis in the presence of extraintestinal manifestations of the joints
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82. Inactive plasma matrix Gla protein and biochemical parameters in patients with ulcerative colitis
I. Tadin Hadjina, P.M. Zivkovic, D. Rusic, M. Vilovic, A. Matetic, D. Supe Domic, A. Tonkic, J. Bozic (Split, HR)

83. Dynamics of secretion of immunoglobulin A in the serum of patients with Crohn‘s disease on the background of basic therapy
G.N. Tarasova, L. Mamedova (Rostov-on-Don, RU)

84. Dynamics of changes in alpha and beta defensins in serum and feces during the course of treatment of ulcerative colitis
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85. Cellular senescence of CD4+ T cells in the adaptive immune response against inflammatory bowel diseases
O.M. Thoma, L. Kreiß, S. Schürmann, K. Scheibe, C. Neufert, B. Mencchicchi, M.F. Neurath, M. Waldner (Erlangen, DE)

86. Is there a difference between patients with ulcerative colitis diagnosed in the emergency department and outpatient clinic
F. Topal, F. Topal (Izmir, TR)

87. Pseudomyxoma peritonei in a patient diagnosed as Crohn’s disease initially
F. Topal (Izmir, TR)

88. Extraintestinal manifestations in patients with inflammatory bowel disease: Experience from a tertiary center
E. Tsoukali, M. Vraka, A. Christidou, M. Galanopoulos, C. Chatzievangelinou, F. Gkeros, A. Tsatsa, E. Archavlis, G. J. Mantzaris (Athens, GR)

89. Differential expression of Th-related cytokine receptors in human colonic subepithelial myofibroblasts among IBD patients and healthy controls
V. Valatas, E. Filidou, I. Drygiannakis, K. Arvanitidis, P. Kitsiou, S. Vradelis, G. Kouklakis, G. Bamias, G. Kolios (Heraklion, Alexandroupolis, Athens, GR)

90.* A vedolizumab-specific 4-gene colonic signature accurately predicting future endoscopic remission in patients with inflammatory bowel disease
B. Verstockt, S. Verstockt, G. Van Assche, S. Vermeire, M. Ferrante (Leuven, BE)

91. Predicting endoscopic response in ustekinumab-treated patients with Crohn‘s disease using multi-omics
B. Verstockt, P. Sudhakar, S. Verstockt, G. Van Assche, S. Vermeire, M. Ferrante (Leuven, BE; Norwich, GB)

92. The first anti-TNF-specific biomarker guiding therapeutic decision in IBD
B. Verstockt, S. Verstockt, G. Van Assche, S. Vermeire, M. Ferrante (Leuven, BE)

93.* Upregulation of IL-17 related pathways in affected colon from ulcerative colitis compared to Crohn’s disease
S. Verstockt, F. Ver Donck, B. Verstockt, E. Glorieus, M. De Decker, V. Ballet, G. Van Assche, D. Laukens, M. Ferrante, F. Mana, M. De Vos, S. Vermeire, I. Cleynen (Leuven, Ghent, Brussels, BE)

94. Primary immunodeficiency and inflammatory bowel disease: What is the main area of cooperation?
A.S. Volkov, O. Bashtovaya, A.A. Iakovlev (Rostov-on-Don, RU)

95. Primary immunodeficiency and ulcerative colitis: It is important gut microbiome?
A.S. Volkov, O. Bashtovaya, A.A. Iakovlev (Rostov-on-Don, RU)

96. Infection rates in patients with inflammatory bowel disease in long-term vedolizumab treatment
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97. Developing an index that predicts escalation of therapy at an outpatient appointment in patients with known ulcerative colitis (UC)
A. Walsh, A. Kormilitzin, C. Hinds, V. Sexton, J. Wilson, O. Brain, S. Keshav, H.H. Uhlig, J. Geddes, G. Goodwin, M. Peters, G. Collins, S.P.L. Travis (Oxford, GB)

98. Non-classical monocyte homing to the gut via α4β7 integrin is essential for macrophage-mediated intestinal wound healing
M. Wiendl, L. Schleier, K. Heibreder, R. Atreya, E. Becker, L.L. Schulze, S.F. Merz, L. Bornemann, M. Gunzer, A.J.M. Watson, C. Neufert, I. Atreya, M.F. Neurath, S. Zundler (Erlangen, Essen, DE; Norwich, GB)

99. Clinical significance of anti-Sacchromyces cerevisiae antibody in pediatric patients with Crohn's disease
P. Yaneva, R. Shentova-Eneva, M. Baycheva, D. Kofinova, E. Ivanova-Todorova, P. Hadjiiski (Sofia, BG)

100. The impact of surgical resection on bone loss in patients with Crohn's disease
Y. Yin, C. Lei, R. Liu, L. Huang, Y. Li, W. Zhu (Nanjing, CN)

101. Persistent fever – Rare presentation of anti-TNF-induced systemic reaction in patient with severe Crohn's disease
P. Zalizko, V. Mokricka, I. Pukite, J. Pokrotnieks, A. Pukitis (Riga, LV)

102. Serum catestatin levels and arterial stiffness parameters in patients with Crohn's disease
P.M. Zivkovic, I. Tadin Hadjina, D. Rusic, M. Vilovic, J.A. Borovac, D. Supe Domic, Z. Puljiz, A. Tonkic, J. Bozic (Split, HR)

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A standard taxi from the airport to Oxford costs approximately £65 to/from Heathrow, and £100 to/from Gatwick, not including tip.

Conflicts of Interest

Members of the scientific committee declare the following potential conflicts of interest:

Markus F. Neurath: Bionorica SE, e.Bavarian Health GmbH, Boehringer Ingelheim GmbH&Co. KG, F. Hoffmann La Roche GmbH, Genentech Inc., Hexal AG, Index Pharmaceuticals AB, Janssen-Cilag GmbH, MSD Sharp & Dohme GmbH, Pentax Europe GmbH, PPM Services S.A., Takeda Pharma Vertrieb GmbH & Co. KG, Tillots Pharma AG, AbbVie Deutschland GmbH & Co. KG, Falk Foundation e.V., AMGEN GmbH; Arthur Kaser: Boehringer Ingelheim, Ferring, Genentech, GlaxoSmithKline, Gilead, Hospira, Janssen/Johnson&Johnson, Pfizer, VHSquared; Fiona Powrie: declares no conflicts of interest.

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