

*The*  
**INSTITUTE**  
*for*  
**DIGESTIVE**  
*and*  
**LIVER**  
**DISORDERS**

*The*

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INSTITUTE

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*for*

DIGESTIVE

*and*

LIVER DISORDERS

*at*

NEW YORK

METHODIST

HOSPITAL

**T**he Institute for Digestive and Liver Disorders at New York Methodist Hospital brings together a unique team of specialists and medical services to provide community education and coordinated, comprehensive diagnosis and treatment of a broad range of gastrointestinal conditions.

The Institute's panel of physician specialists includes gastroenterologists, hepatologists, surgeons, laparoscopic surgeons, gastrointestinal radiologists, medical and radiation oncologists and pathologists. Nutritionists and psychologists are also important members of the team. Referrals to these specialists or to programs and services available at New York Methodist Hospital, can be made through an individual's primary care physician or can be requested directly through the Institute's referral service. All diagnostic and therapeutic procedures are performed at New York Methodist Hospital or in the offices of the referral physicians.

Physicians and other health professionals affiliated with the Institute are also available to speak to community groups on a variety of topics related to the prevention and treatment of gastrointestinal disorders. Other community outreach activities of the Institute include the distribution of informational materials, support groups and screening programs.

## PROGRAMS AND SERVICES

The programs and services offered by the Institute include

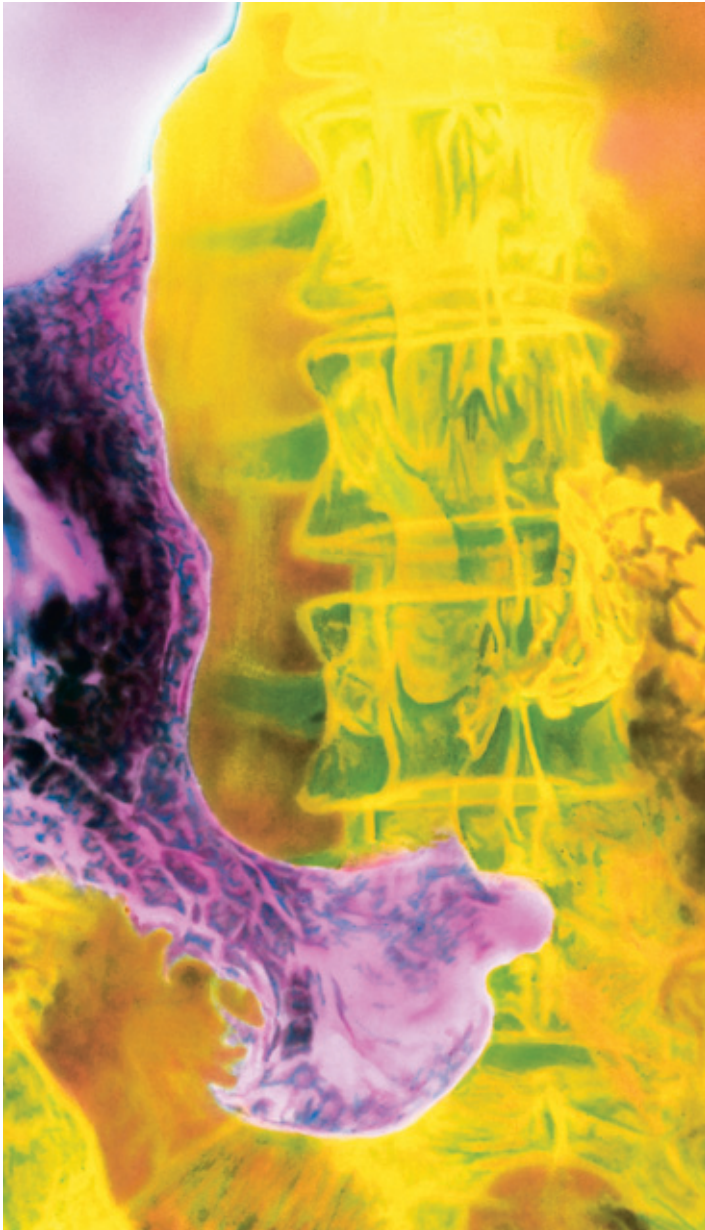
- the Colorectal Cancer Program
- the Heartburn (GERD) Program
- the Chronic Hepatitis B & C Program  
(Liver transplant evaluation listing)
- the Ulcer Program
- the Bowel Disorders Program
- the Pediatric Gastroenterology Program
- Treatment of gallbladder and pancreatic conditions



### COLORECTAL CANCER PROGRAM

Since colon cancer has no early warning symptoms, awareness of the disease and timely screening tests are key to prevention, detection and successful treatment. Up to 90 percent of colorectal cancer deaths can be prevented through early detection and timely removal of precancerous polyps from the colon.

The American College of Gastroenterology recommends that every individual be screened for colon cancer at age 50 and



every ten years thereafter. Those with increased risks (such as a family history of colon cancer) may need more frequent screenings that begin at an earlier age. A range of diagnostic tests is used to screen for and diagnose colon cancer. After an examination and evaluation, your physician or a gastroenterologist at the Institute will recommend those diagnostic tests, based on your personal circumstances. In most cases, the test will be performed in the state-of-the-art Endoscopy Suite at New York Methodist Hospital.

**THE DIAGNOSTIC TESTS AVAILABLE INCLUDE:**

- Capsule endoscopy (the edible camera)
- Screening colonoscopy and sigmoidoscopy
- Surveillance colonoscopy (for patients known to have polyps)
- Endoscopic ultrasound (provides the most accurate means to gauge the size and depth of penetration of tumors; it may also be used to detect tumors of the esophagus or pancreas)
- PET scanning (positron emission tomography, which can identify even very small metastatic tumors)

If colon cancer is detected, the stage at which it is found will play a major part in the development of the treatment plan. A gastroenterologist will provide case management for the treatment, which may include polyp removal, tumor resection (possibly using laparoscopic surgical techniques), and/or chemotherapy and radiation therapy.

## HEARTBURN (GERD) PROGRAM

**G**astroesophageal reflux disease (GERD) occurs when liquids and foods in the stomach move back through the esophagus, into the throat. The most common sign of GERD is heartburn, a pain in the middle of the chest. GERD can also cause throat irritation or other problems, such as the feeling of a lump in the throat, trouble swallowing or hoarseness.

GERD can be diagnosed through advanced endoscopic procedures, ambulatory esophageal acid monitoring and esophageal manometry. With the Bravo Ph monitoring system available at NYM, physicians can diagnose GERD using less invasive means than traditional methods. While providing greater accuracy, the monitoring system is also more comfortable for patients. An individual who is diagnosed with GERD may be treated with dietary counseling with a nutritionist or with the prescription of advanced medical regimens by a gastroenterologist. If these methods are not effective, or if GERD is chronic, laparoscopic fundoplication, a minimally invasive surgical procedure, which has a high rate of success in preventing acid reflux, and which is available at New York Methodist Hospital, may be recommended.



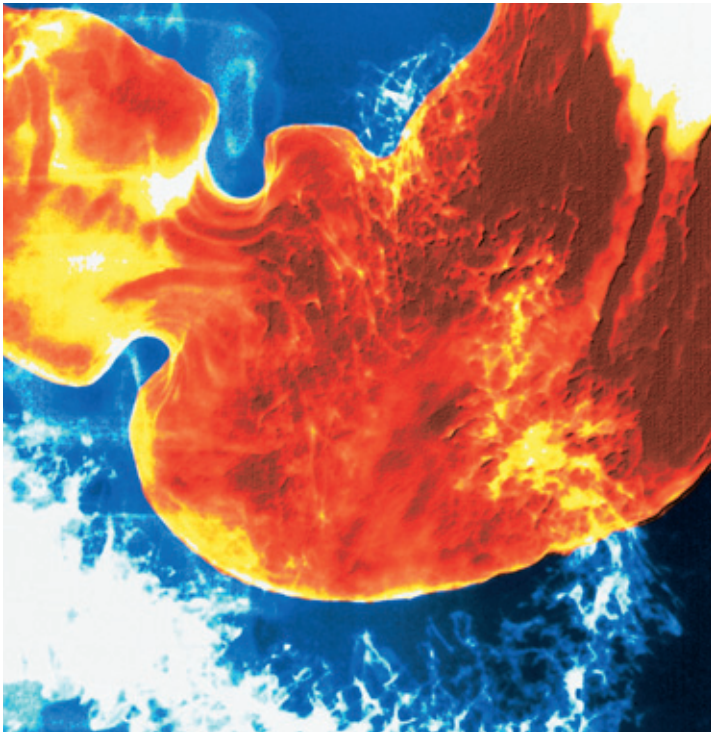
## CHRONIC HEPATITIS B & C PROGRAM

**H**epatitis is an inflammation of the liver. The different viruses that cause hepatitis are labeled "A" through "E".



Each of these viruses can cause acute (short-term) hepatitis. The hepatitis B and C viruses can cause chronic hepatitis, in which the infection is prolonged, sometimes for life.

Individuals with symptoms of hepatitis (jaundice, fatigue, abdominal pain, loss of appetite, nausea, diarrhea and vomiting), need to be diagnosed to determine whether they have hepatitis and, if so, what type they have. Those who have hepatitis B or C may need further diagnosis and evaluation to determine the severity of the disease, which may range from mild to severe. A percentage of cases may, over a period of years, result in cirrhosis, liver failure or liver cancer.



Hepatologists at the Institute can offer sophisticated evaluation and diagnosis, aided by ultrasound guided liver biopsy and genotyping of the hepatitis C virus. Genotyping provides the best means of determining the likelihood of a successful response to treatment.

In treating the disease, specialists at the Institute can prescribe the most advanced drug therapies. Because of the Institute's affiliation with the NewYork-Presbyterian Hospital's Liver Transplant Center, access to evaluation by specialists from the Center can also be provided and, where appropriate, on-site

listing for liver transplantation by transplant physicians at New York-Presbyterian can be arranged.

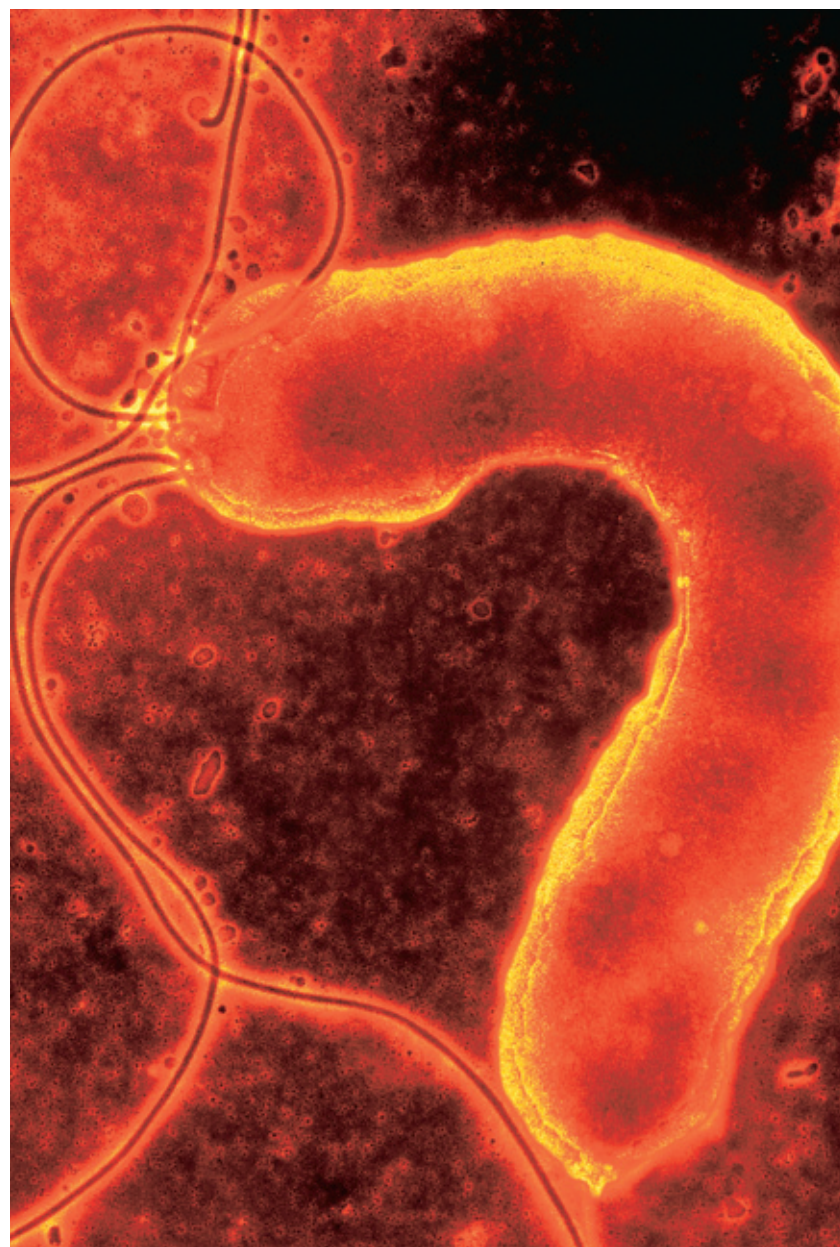
A hepatitis C support group, which is co-sponsored by the Institute, meets regularly at New York Methodist Hospital.

## ULCER PROGRAM

A peptic ulcer is a sore on the lining of the stomach or duodenum (the beginning of the small intestine). Some ulcers are caused by long-term use of nonsteroidal anti-inflammatory agents like aspirin and ibuprofen and, in rare cases, cancerous tumors in the stomach or pancreas can cause ulcers. However, the main cause of a peptic ulcer is bacterial infection.

The type of bacteria which causes almost all peptic ulcers is *Helicobacter pylori* (*H. pylori*). Researchers have not yet discovered how people become infected with *H. pylori* or why it causes ulcers in some people.

After an examination and evaluation, *H. pylori*-related ulcers are most accurately diagnosed with an endoscopy, which allows the physician to see the lining of the esophagus. Gastroenterologists from the Institute can treat these ulcers



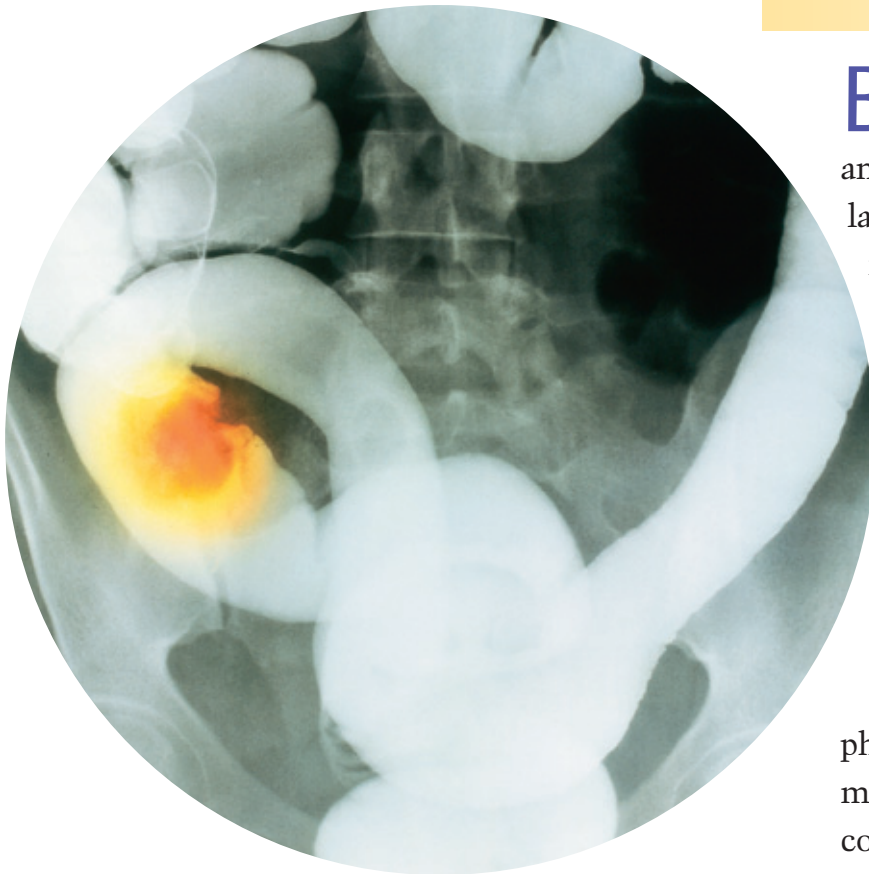
with advanced medical therapy which includes H. pylori eradication regimens. Advanced argon laser treatments for bleeding lesions of the gastrointestinal tract are also offered.

## BOWEL DISORDERS PROGRAM

**B**owel disorders can range from short-term, self-limiting episodes of diarrhea and constipation to more chronic and/or serious conditions, syndromes and diseases, such as lactose intolerance, celiac disease, diverticulitis and diverticulosis, irritable bowel syndrome and inflammatory bowel disease (such as Crohn's disease or ulcerative colitis).

Because the symptoms of many bowel disorders are similar, careful diagnosis is especially important. In addition to physical examination and evaluation, doctors affiliated with the Institute may use a range of colonoscopic and radiological diagnostic modalities.

Once the problem has been diagnosed, Institute physicians can work with each individual patient to plan the most effective dietary and medical treatment for his or her condition.

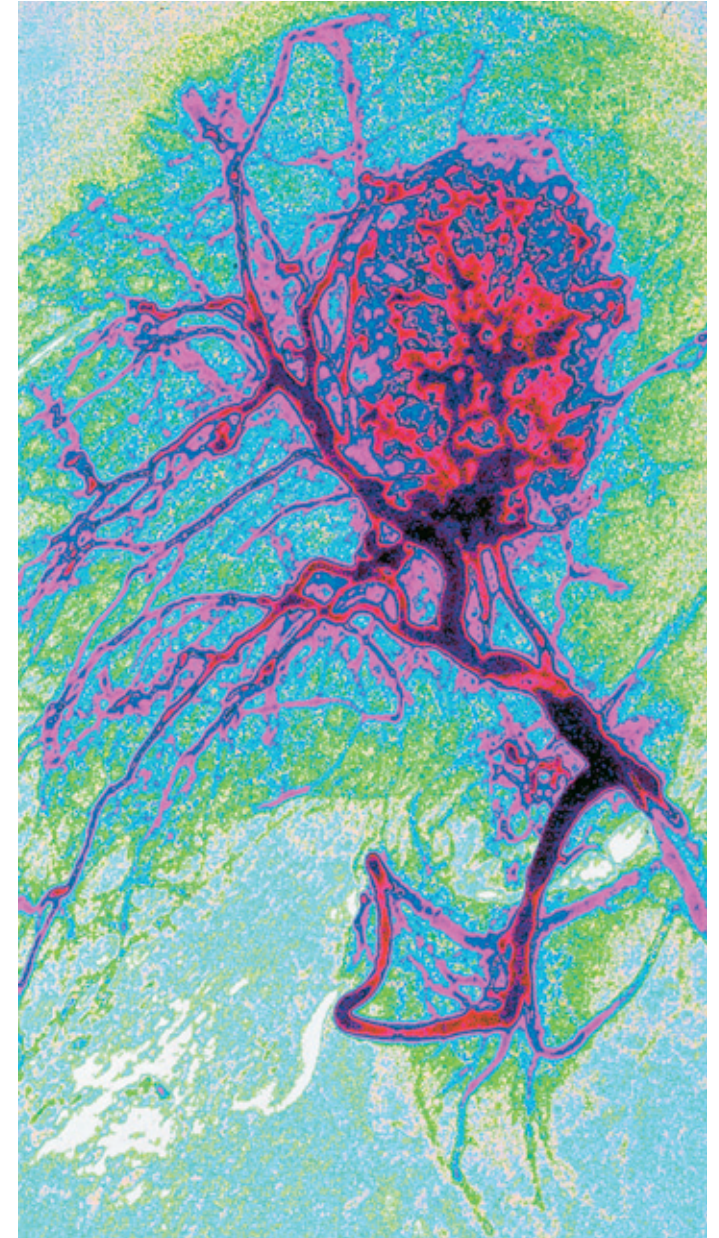
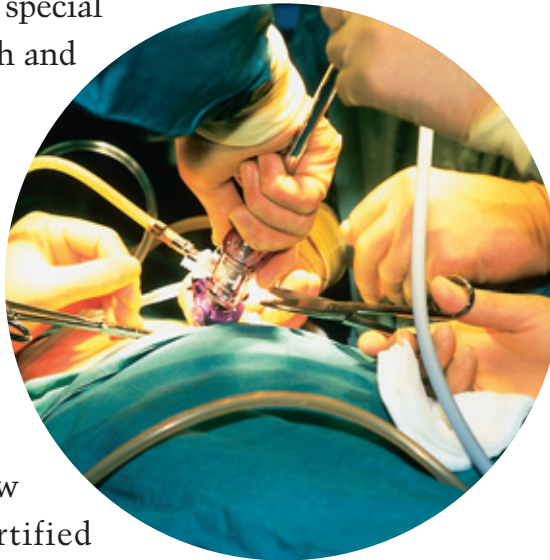


## PEDIATRIC GASTROENTEROLOGY PROGRAM

The pediatric gastroenterology program offers diagnosis and treatment of a variety of bowel and liver disorders in children. Some of these disorders may begin at birth, others appear at various points during childhood and adolescence.

Problems commonly seen by physicians affiliated with the program include regurgitation, colic, vomiting, constipation, diarrhea, recurrent abdominal pain, jaundice, blood in the stools, failure to thrive and formula intolerances. Children with these disorders present a special challenge because, along with the medical treatment that they receive, they need special care to ensure that their normal growth and development is not disrupted.

Special procedures that can be used to evaluate and diagnose pediatric gastrointestinal disorders include capsule endoscopy (the edible camera), upper and lower endoscopies, liver biopsies and suction rectal biopsies. These procedures are performed at New York Methodist Hospital by board-certified specialists in pediatric gastroenterology.



## GALL BLADDER AND PANCREATIC CONDITIONS

The endoscopic retrograde cholangiopancreatography equipment available in the Endoscopy Suite at New York Methodist Hospital makes it possible for physicians to perform highly advanced diagnostic and treatment procedures that can detect and describe disorders of the bile ducts and pancreatic ducts as well as non-surgical removal of bile duct gallstones. Endoscopic ultrasound is also used to determine the size, location and depth of penetration of tumors of the pancreas.

## REFERRAL

For referral to a physician affiliated with the Institute for Digestive and Liver Disorders or to schedule an appointment for a test procedure, please call (toll-free) 866/DIGEST1. (866-344-3781)

For community support services (printed materials, community lectures, support group information), call: 718/780-5367.





## OUR LOCATION

**Directions: By Bus:** #67 Runs along Seventh Avenue  
**By Subway:** The "F" to the Seventh Avenue station. Walk three blocks to the Center.

You can transfer to the "F" from the "R" at the Smith/Ninth Street station. Transfer from the "A" at the Jay Street Boro Hall station.

**For Cars:** The parking garage entrance is on Sixth Street opposite the Hospital, between Seventh and Eighth Avenues.

**866-DIGEST1 (866-344-3781)**



Affiliated with The Weill Medical College of Cornell University  
Member, NewYork-Presbyterian Healthcare System