Meet the Rome Foundation

Over Two decades of Service to Patients and the Field of Functional GI Disorders

Mission: To Improve the lives of people with Functional GI Disorders
The Rome Foundation is an independent not for profit 501(c) 3 organization that provides support for activities designed to create scientific data and educational information to assist in the diagnosis and treatment of functional gastrointestinal disorders (FGIDs). Our mission is to improve the lives of people with functional GI disorders.

For more than two decades, beginning with the first working team committee at Roma ‘88 (see figure 1), the Rome organization has sought to legitimize and update our knowledge of the FGIDs. This has been accomplished by bringing together scientists and clinicians from around the world to classify and critically appraise the science of gastrointestinal function and dysfunction.

This knowledge permits clinical scientists to make recommendations for diagnosis and treatment that can be applied in research and clinical practice.

The Rome Foundation is committed to the continuous development, legitimization and preservation of the field of FGIDs through science-based activities. We are inclusive and collaborative, patient-centered, innovative and open to new ideas. Figure 2 shows our organizational structure.

**GOALS OF THE ROME FOUNDATION**

- Promote global recognition and legitimization of FGIDs
- Advance the scientific understanding of their pathophysiology
- Optimize clinical management for these patients
- Develop and provide educational resources to accomplish these goals

**OVER 25 YEARS THE ROME FOUNDATION HAS:**

- Developed the first classification system for FGIDs (1990)
- Developed and validated questionnaires for research (1993)
- Epidemiological study of FGIDs (Rome I, 1993); First global study (2017)
- Criteria adopted by pharmaceuticals and regulatory agencies (Rome II, 2000)
- Provides a forum for interaction among industry and regulatory agencies (Advisory Council)
- Translations of questionnaires and educational products (Rome III, 2006)
- Provides a forum for interaction among industry and regulatory agencies (Advisory Council)
- Annual research awards (2007); collaboration with AGA (2014)
- Global educational expansion: Asia, Latin America, Eastern Europe (2010)
- Expanded membership through associates program (2010)
- International symposia (Endpoints/Outcomes, IBS-Global Perspective)
- Diagnostic algorithms (2010)
- Multi-Dimensional Clinical Profile (2014)
- Rome IV launch of 6 books and online format (2016)
- Intelligent software learning application (2016)
# Table of Contents

**Introduction** .................................................................................. 1  
**Rome Foundation Board** ................................................................. 6-9  
**Rome Foundation Administration** .................................................. 10-12  
**Rome IV** ....................................................................................... 14-16  
**Global Initiative** ........................................................................... 17-20  
**Active Committees** ....................................................................... 21-22  
**Research Program** ........................................................................ 23-25  
**Symposia and Lectureships** .............................................................. 26  
**Education Program** ....................................................................... 27-29  
**Completed Working Team Committees** ......................................... 30-34  
**Rome IV Education Products** .......................................................... 35-39  
**Collaborations** ............................................................................... 41  
**Rome Foundation Sponsors** .............................................................. 41
The Rome Foundation Members Relations with the Pharmaceutical Industry Guidelines

The Rome Foundation takes ethics and conflict of interest issues very seriously, and therefore, developed specific guidelines to which its members are held. Completed disclosure forms for Rome Foundation are kept on file by Rome Foundation administration.

Members of the Rome Foundation are involved with the development of creative educational products including book chapters, journal articles, monographs, CD slide sets and other materials. Other activities include research to validate the diagnostic criteria and questionnaire development. The results of these processes are widely based and publicly recorded, and has gained the confidence of professional groups, researchers, the pharmaceutical industry and regulatory agencies around the world. Since much of the funding of the Rome process is derived from the pharmaceutical industry, it is important that the committee’s work be independent of sponsor influence and that any perception of its direction by industry or conflict of interest of its members be avoided. Therefore, the members of the Rome Foundation hereby agree to the following principles:

1. No Rome Foundation Member shall be a regular employee (>50% time) of any pharmaceutical company or any group with a commercial interest in the Rome process.
2. The Rome Board shall not undertake projects on behalf of individual companies or commercial concerns, nor will it enter into any confidential agreements with them.
3. Rome Foundation Members shall declare and have on record any relationship with the pharmaceutical industry or other commercial entity that may be supporting the Rome process. These relationships must be updated biennially. In principle, members should not confine their advisory board, consulting or speaking arrangements to only one company.
4. No Rome Foundation Members shall represent the Rome Foundation to a regulatory agency that is adjudicating acceptance of a drug or device for functional gastrointestinal disorders by a regulatory agency.
5. No Rome Foundation Member shall advocate a drug for the treatment of a functional gastrointestinal disorder, nor support its application to a regulatory agency or drug funding authority in the name of the committee. Members may do so as individuals.
6. When consulting or lecturing, members shall ensure that it be known they are acting as individuals, not on behalf of the Rome Foundation. This applies to members’ relationships to pharmaceutical companies, regulatory agencies or any other group with a vested interest in the Rome process. This does not apply when the Rome Committee is sponsoring a meeting or is invited to present at a meeting.
7. No pharmaceutical company or other interested commercial concern shall directly reimburse Board Members or Subcommittee Members for Rome activities.
8. Communications of an academic nature involving the Rome Foundation with the pharmaceutical industry shall be conducted through the Rome Advisory Council (RAC). The RAC consists of representatives of all Rome Foundation sponsors, Rome Board members and representatives of interested scientific and regulatory agencies. Representations and proposals by industry regarding the Rome process submitted to the Board shall be discussed and debated at RAC meetings. Board members may interact with industry as individuals but not on Rome matters or as Board representatives.
9. Industry representatives may not sit on the Rome subcommittees, nor should they be seen to have undue influence on the deliberations of any subcommittee. Representations from Industry regarding subcommittee activities should be addressed to the Board through the RAC.
Dr. Drossman received his M.D. degree at Albert Einstein College of Medicine and obtained his medical residency at the University of North Carolina School of Medicine and NYU – Bellevue Medical Center. He subspecialized in psychosocial (psychosomatic) medicine at the University of Rochester School of Medicine and in Gastroenterology at the University of North Carolina.

In 2012, Dr. Drossman founded the Drossman Center for the Education and Practice of Biopsychosocial Care LLC care as an entity to help train physicians in relationship centered biopsychosocial care with emphasis on communication skills and enhancing the patient doctor relationship. Some focus is on the care of difficult to diagnose and manage patients with functional gastrointestinal disorders such as IBS.

Dr. Drossman is Professor Emeritus of Medicine and Psychiatry at the University of North Carolina School of Medicine where he was on staff from 1977 through 2011. He was founder and co-director of the UNC Center for Functional Gastrointestinal and Motility Disorders (since 1993). He was founder, past chair (1989-1993) and newsletter editor of the Functional Brain-Gut Research Group of the AGA, Chair (since 1989) of the Rome Committees (Rome I, II, III and IV) and President of the Board of the Rome Foundation (since 2004), past Chair of the Functional GI American Digestive Health Foundation’s Digestive Health Initiative (1999-2001) and of the Motility and Nerve-Gut Section of the AGA Council (2003-2005). He is Past-President of the American Psychosomatic Society (1997), a Fellow of the American College of Physicians, a Master of the American College of Gastroenterology, and is on the Board of Directors and Chair of the Scientific Advisory Board of the International Foundation for Functional GI Disorders (IFFGD). He has served on three committees of the Institute of Medicine Committee on Gulf War and Health, has been an Ad Hoc member of NIHNCAM Advisory board, and is on the NIH-National Commission on Digestive Diseases.

Dr. Drossman has written over 500 articles and book chapters, has edited four books, a GI Procedure Manual, and textbook of Functional GI disorders (Rome I, II, III Rome IV, Primary Care Book, Understanding the Irritable Gut, and The Multi-Dimensional Clinical Profile), and serves on six editorial and advisory boards in Gastroenterology, psychosomatic medicine, behavioral medicine, and patient health. He served 5-years as Associate Editor of the journal Gastroenterology and was the Gastroenterology Section Editor of the Merck Manual for 17 years.

Dr. Drossman’s research relates to the clinical, epidemiological, psychosocial and treatment aspects of gastrointestinal disorders. He has developed and validated several assessment measures (e.g., illness severity and quality of life questionnaires for IBD and IBS, a physician-patient relationship questionnaire, and an abuse severity scale) for clinical research, is involved in psychosocial outcomes research, and has also studied brain imaging in IBS and abuse. He was principal investigator on several NIH sponsored research grants with over $15,000,000 in funding. This included a multi-center grant for treatment (antidepressant and cognitivebehavioral treatment) of the functional bowel disorders. He also consults with regulatory and pharmaceutical agencies regarding the design and evaluation of treatment trials. He is a recipient of the Janssen Award for Clinical Research (1999), the American Psychosomatic Society President’s Award (2003), the AGA Joseph B. Kirsner – Fiterman Award in Clinical Research (2005) the AGA Mentors Research Scholar Award (2007), and the American Journal of Gastroenterology Lectureship (2011). He has also received several “Who’s Who”, “Patient Choice” and “Best Doctors” citations over the past 15 years.

Dr. Drossman’s educational and clinical interests relate to the psychosocial and behavioral aspects of patient care. He has produced numerous articles and videotapes on the biopsychosocial aspects of medical care, medical interviewing and the patient-doctor relationship, and received second prize at the 1997 AMA International Film Festival. As a Charter Fellow of the American Academy of Communication in Health Care, he facilitates workshops to develop clinical skills in physician-patient communication. He received the AGA Distinguished Educator Award (2004), received the American College of Gastroenterology David Sun Lecturer Award (2012), was identified as a “Best Gastroenterologist” in Men’s Health (2007) and in Woman’s Health (2008) and is featured as one of 12 gastroenterologists in a book “Best Gastroenterology Practices” (2007).

With regard to the Rome Foundation, Dr. Drossman was founder and currently serves as President of the Board. He has been editor in chief of Rome I, II and III books and currently of Rome IV published in 2016. The Rome IV project consists of 6 books available in print and e-book form and by subscription.
Fernando Azpiroz, MD, PhD
Chief Department of Digestive Diseases and Professor of Medicine
Hospital General Vall d’Hebron
Autonomous University of Barcelona
Barcelona, Spain

Dr. Azpiroz is currently Chief of the Department of Digestive Diseases at the University Hospital Vall d’Hebron, Autonomous University of Barcelona, Spain, since the year 2009, and Professor of Medicine. He graduated from medical school at the University of Valladolid, Spain, in 1977, and after completing a residency program in general surgery at the San Carlos University Hospital of Madrid, he followed a three year fellowship in the Gastrointestinal Research Unit at the Mayo Clinic, where he received the Edward C. Kendall Award for Meritorious Research.

Dr. Azpiroz clinical practice develops in a large referral unit, and specifically focuses on functional gut disorders. His research program investigates the origin of gastrointestinal sensations, either pleasant or unpleasant (symptom), which involves the control mechanisms of gut motility, sensitivity and contents. Dr. Azpiroz has been distinguished with the 1999 Janssen Award for Clinical Research in Digestive Diseases, the Fourth Research Award of the International Group for the Study of Gastrointestinal Motility, the 2003 Research Scientist Award of the Functional Brain Gut Research Group, and the Senior Investigator-Clinical Science Award of the International Foundation for Functional Gastrointestinal Disorder. At present Dr Azpiroz serves as Chairman of the Microbiota & Health Section, European Society of Neurogastroenterology and Motility and he is a member of the Board of Directors, Rome Foundation for the Study of Functional Gastrointestinal Disorders.

Giovanni Barbara, MD
Department of Digestive Diseases and Internal Medicine
University of Bologna, Italy

Giovanni Barbara graduated Summa cum Laude in Medicine at the University of Bologna, Italy. He subsequently qualified in Internal Medicine and then in Gastroenterology at the same University. He was trained partly in London, UK and completed a three years basic science post-doctoral research fellowship in neuro-immunology at McMaster University in Canada. Currently he is involved in clinical gastroenterology diagnostic and therapeutic endoscopy, teaching and research at the Department of Digestive Diseases and Internal Medicine of the University of Bologna (AD 1088).

Professor Barbara’s main research interest relate to basic and clinical aspects of functional gastrointestinal disorders, neuro-immunology and host-microbiota interactions. He has authored numerous indexed peer-reviewed articles and reviews on these topics, published in various biomedical journals, including Gastroenterology, Gut, Journal of Clinical Investigation and Trends in Pharmacological Science. He is, or has been, a member of the Editorial Board of Gut, American Journal of Gastroenterology, Neurogastroenterology and Motility, the American Journal of Physiology and other international scientific Journals.

Professor Barbara has received numerous national and international awards including the Master Award in Gastroenterology from the American Gastroenterological Association. He is currently President of the European Society of Neurogastroenterology and Motility (ESNM).
Lin Chang, MD
Professor of Medicine in the Division of Digestive Diseases and Department of Medicine at the David Geffen School of Medicine at UCLA
Los Angeles, CA, USA

Lin Chang, MD, is a Professor of Medicine in the Division of Digestive Diseases, Department of Medicine at the David Geffen School of Medicine at UCLA. She serves as the Co-Director of the Oppenheimer Center for Neurobiology of Stress and Resilience at the David Geffen School of Medicine at UCLA. This center is an interdisciplinary research and education organization, dedicated to the study of brain-body interactions in health and disease. She is also Program Director of the UCLA Gastroenterology Fellowship Program and Director of the Digestive Health and Nutrition Clinic at UCLA. Dr. Chang’s clinical expertise is in functional gastrointestinal disorders which include irritable bowel syndrome (IBS), chronic constipation, and functional dyspepsia. She is a funded NIH-investigator studying brain-gut interactions underlying IBS. Specifically, her research is focused on the pathophysiology of IBS related to stress, early life adversity, sex differences, and genetic and epigenetic factors, and gut microbiome and the treatment of IBS.

Dr. Chang is the recipient of the Janssen Award in Gastroenterology for Basic or Clinical Research and the AGA Distinguished Clinician Award. She is Past-President of the American Neurogastroenterology and Motility Society (ANMS), and is a member of the Rome Foundation Board of Directors, the Rome IV Editorial Board, and the Functional Bowel Disorders Committee. She also serves as the liaison for three Rome IV committees: 1) Childhood Functional Gastrointestinal Disorders: Neonate/Toddler; 2) Age, Gender and Women’s Health and the Patient; and 3) Multi-Cultural Aspects of Functional Gastrointestinal Disorders committees. Dr. Chang is a fellow of the American Gastroenterological Association and American College of Gastroenterology, and a member of the Society for Neuroscience. She recently served as Associate Editor of the American Journal of Gastroenterology. Dr. Chang is a member of the FDA GI Drug Advisory Committee and the NIH Clinical, Integrative, Molecular Gastroenterology (CIMG) Study Section. She has authored more than 100 original research articles, 50 review articles, and 20 book chapters on her specialty interests.

William D. Chey, MD, AGAF, FACG, FACP
Professor of Medicine
Director, GI Physiology Laboratory
Co-Director, Michigan Bowel Control Program
H. Marvin Pollard Institute Scholar
Division of Gastroenterology
University of Michigan Health System
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Dr. Chey received his BA degree from the University of Pennsylvania and medical degree & training in internal medicine at the Emory University School of Medicine. He completed a fellowship in gastroenterology at the University of Michigan in Ann Arbor. Following fellowship, Dr Chey has remained at the University of Michigan, where he is currently Timothy T. Nostrant Professor of GI & Nutrition Sciences. He has helped to found and directs a number of programs at the University of Michigan including the Digestive Disorders Nutrition & Lifestyle Program and Michigan Bowel Control Program.

His research interests focus on the diagnosis and treatment of the functional bowel disorders, acid-related disorders, and Helicobacter pylori (H. pylori) infection. Dr Chey has received funding for his research from federal and private sources.

Dr. Chey has authored more than 300 manuscripts, reviews and book chapters. He is Editor Emeritus of the American Journal of Gastroenterology (2010-2015), Clinical & Translational Gastroenterology (2011-2014). Dr. Chey is a member of the Board of Trustees of the American College of Gastroenterology. Dr. Chey joined the Board of Directors of the Rome Foundation in 2010 and is a member of the editorial board of the Rome IV criteria. He is a member of the Advisory Board of the International Foundation of Functional GI Disorders.

He has been elected to “Best Doctors” since 2001 and “America’s Top Doctors” since 2009. In 2015, Dr. Chey was named as one of the “190 Gastroenterologists to Know” by Becker’s ASC. In 2014, Dr. Chey was inducted into the Clinical Excellence Society of the Department of Medicine, received the Dean’s Outstanding Clinician Award, and was inducted into the League of Research Excellence at the University of Michigan. In 2015, he was inducted into the League of Clinical Excellence at UM and received the Distinguished Clinician Award from the American Gastroenterological Association.
Dr. John Kellow is currently Associate Professor and Head of the Discipline of Medicine, Northern Clinical School, University of Sydney, and Gastroenterologist and Director of the Neurogastroenterology Unit at Royal North Shore Hospital, Sydney. Dr. Kellow graduated MBBS from the University of Sydney and subsequently received his doctorate (MD) from that university in 1988. He was made a fellow of the Royal Australasian College of Physicians in 1985. Dr. Kellow was a University of Sydney Travelling Fellow at the Mayo Clinic, USA in 1984-1985, and was a Commonwealth Medical Fellow at the Royal London Hospital Medical College, UK in 1986. He is a member of the Gastroenterological Society of Australia, The American Gastroenterological Association, The American Neurogastroenterology and Motility Society, and the European Society of Neurogastroenterology and Motility. Dr. Kellow has published extensively including original research papers, book chapters and reviews. His primary and long-standing research interests are disorders of gastrointestinal motility and the pathophysiology and treatment of the functional gastrointestinal disorders. He is a Board Member of the Rome Foundation, and a member of the Advisory Board of the International Foundation for Functional Gastrointestinal Disorders. He serves on the Editorial Boards of a number of international journals in gastroenterology. He has also had a long-standing interest in undergraduate and postgraduate medical education and curriculum development, and was previously Associate Dean (Assessment) Faculty of Medicine, University of Sydney.

Max J. Schmulson W., MD
Professor of Medicine
Laboratorio de Hígado, Páncreas y Motilidad (HIPAM)
Unit of Research in Experimental Medicine
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Hospital General de México
Mexico City, Mexico

Dr. Schmulson was born in Barranquilla-Colombia and received his MD degree from the Pontificia Universidad Javeriana of Santa Fe de Bogota, where he then trained in Internal Medicine. After, he continued his Gastroenterology training in the Instituto Nacional de Ciencias Médicas y Nutrición Salvador Zubirán (INCMNSZ) in Mexico City, graduating with the award for the Best Residency-Graduation Thesis. He then worked in Los Angeles under the mentorship of Emeran Mayer in UCLA, focusing on the differences in symptoms, motility and visceral sensitivity of IBS patients according to the bowel habit predominance. Upon returning to Mexico he worked in the INCMNSZ for 6 years, and in 2005 he was appointed Full Professor of Medicine of the Universidad Nacional Autónoma de México (UNAM) and currently works in the Laboratory of Liver, Pancreas and Motility (HIPAM) of the Unit of Research in Experimental Medicine. Dr. Schmulson’s research is focused on the epidemiology of FGIDs and in the immunological factors associated with IBS. He also works in Clínica Lomas Altas in Mexico City where he runs the Motility Unit and in the Gastroenterology and Endoscopy Group in the ABC Hospital.

Dr. Schmulson has published more than 80 papers on peer-reviewed journals, 4 books and 48 book chapters on Functional Gastrointestinal Disorders. In 5 opportunities he has received the award “Dr. Abraham Ayala Gonzáles” and the Epidemiological Research from the Mexican Gastroenterological Association. He worked in the Latin American Consensus on IBS and coordinated the Latin American Consensus on Chronic Constipation. Dr. Schmulson previously served as Chair of the Membership Committee of the Functional Brain Gut Research Group and as Councillor as well. In 2006 he was one of the founders of the Latin American Society for Neurogastroenterology and served as the first President. He also served as Editor in Chief of the Revista de Gastroenterología de México from 2012-2014 and as Associated Editor of the American Journal of Gastroenterology from 2010-2015. He is a National Researcher (SNI-II) and a member of the National Academy of Medicine in Mexico.

Regarding the Rome Foundation, Dr. Schmulson worked on the Spanish translation of the Rome II Modular Questionnaire and Rome III Adult Questionnaire, on the Management and Design of Treatment Trials Committee of the Rome CD Slide Set and was a charter member of the International Liaison Committee serving as Chair from 2009 to 2013. He also served in the Multinational Working Team that released its report in 2014, in the Multi-Cultural Aspects and Design of Treatment Trials chapters of Rome IV and in the IBS Global Study Executive Committee.
Magnus Simrén, MD, PhD

Professor of Gastroenterology
University of Gothenburg
Consultant, Department of Internal Medicine
Sahlgrenska University Hospital
Gothenburg, Sweden

Dr. Magnus Simrén is working as Consultant in the Department of Internal Medicine, Sahlgrenska University Hospital, Göteborg, Sweden, and is Professor in Gastroenterology at the Department of Internal Medicine & Clinical Nutrition, Institute of Medicine, Sahlgrenska Academy at the University of Gothenburg. Doctor Simrén has a 50% research position in Molecular Gastroenterology at the Swedish Research Council 2011-2016. He graduated from medical school, University of Gothenburg in 1991, and afterwards completed his internship and fellowship in internal medicine at the County Hospital of Lidköping. From 1998 to 1999, Doctor Simrén completed his fellowship in gastroenterology at Sahlgrenska University Hospital. He defended his thesis entitled “Irritable Bowel Syndrome: Pathophysiological and clinical aspects” in 2001. He was a research fellow at the University of Leuven, Belgium, in 2002, focusing on the pathophysiology of functional dyspepsia and GERD.

Doctor Simrén is now a principal researcher in the Neurogastroenterology Unit at Sahlgrenska University Hospital. His main research areas are the pathogenesis and pathophysiology of functional GI disorders, as well as the treatment of these disorders and the importance of psychological factors. He has published more than 180 original articles and also written book chapters on GI motility diseases and functional GI disorders, and is currently supervisor for thirteen PhD students. Doctor Simrén has been the President of the Scandinavian Association for Gastrointestinal Motility (SAGIM), Scientific Secretary to the Swedish Society of Gastroenterology, and a served as council member for several international organizations. He is currently the chair of the United European Gastroenterology (UEG) Scientific Committee and the Clinical Editor of Neurogastroenterology and Motility, and has been working as Deputy Editor and Associate Editor of Gut. Doctor Simrén received the Rising Star Award from the Association of National European and Mediterranean Societies of Gastroenterology (ASNEMGE) in 2006, and is a member of the Rome Foundation Board of Directors since 2011. 2010-2012 he chaired the Rome Foundation Working team on “Intestinal microbiota in functional bowel disorders”, and has served as a member of the Rome IV committees for Functional Bowel Disorders and Centrally Mediated Disorders of GI Pain. 2015-2016 he holds a position as visiting research scientist at the Center for Functional GI and Motility Disorders, University of North Carolina, Chapel Hill, NC, United States.

Ami Sperber, MD, MSPH

Emeritus Professor of Medicine
Faculty of Health Sciences
Ben-Gurion University
Negev, Israel

Dr. Ami D. Sperber is Emeritus Professor of Medicine in the Faculty of Health Sciences of Ben-Gurion University of the Negev, Israel. He was born and raised in New York City and immigrated to Israel at the age of 23. In 1981 he received his MD degree in Israel and in 1992 he completed an MSPH (Master of Science in Public Health) degree from the Department of Health Behavior and Health Education in the School of Public Health of the University of North Carolina at Chapel Hill.

In addition to patient care, Dr. Sperber has conducted extensive research on IBS including (a) the local and global epidemiology of IBS and other FGIDs, (b) co-morbidity in FGIDs, in particular sleep impairment and fibromyalgia, and (c) psychosocial aspects of FGIDs. He is the author of a book, in Hebrew, on IBS for the general public in Israel, which emphasizes the biopsychosocial approach to diagnosis and treatment and presents an empathetic description of the disorder, its diagnosis and treatment. The book was translated into English and is available as an e-book on Amazon.

Dr. Sperber has led the Rome Foundation global initiative since its inception. In 2011 he initiated and co-chaired the first international symposium on IBS-the Global Perspective. He chaired the RF Working Team on Multinational, Cross-cultural Research, which published its final report in January 2014 and has published three papers. He currently chairs the Executive Committee of the IBS Global Epidemiology study, and is chair of the Rome IV chapter committee on Cross-cultural factors in FGIDs. He is the ongoing head of the Rome Foundation Translation Project. Dr. Sperber has published on cross-cultural, multinational research and translation methodology and been invited to speak on these and other topics at meetings around the world.

Dr. Sperber has participated in and headed several other committees and working teams of the Rome Foundation including participation in the Rome III process, head of the committee that prepared the educational slide set on the psychosocial aspects of IBS, and head of the committee that prepared a clinical algorithm on the Functional Abdominal Pain Syndrome.
Jan Tack, MD, PhD
Professor and Head of Department, TARGID
University of Leuven
Head of Clinic, Gastroenterology Division
University Hospitals Leuven
Leuven, Belgium

Professor Jan Tack is currently a Head of Clinic in the Department of Gastroenterology, a Professor in Internal Medicine and head of the Department of Clinical and Experimental medicine at the University of Leuven, and a principal researcher in TARGID (the Translational Research Center for Gastrointestinal Disorders) at the University of Leuven. He graduated summa cum laude in 1987 from the University of Leuven and specialized in internal medicine and gastroenterology at the same institution. A research fellow at the Department of Physiology at the Ohio State University, Columbus, Ohio, USA, from 1989 to 1990, he has been conducting research at Leuven University since 1990. Professor Tack’s scientific interest focuses on neurogastroenterology and motility, and includes diverse topics such as the pathophysiology and management of gastrointestinal functional and motor disorders (including GERD, globus, dysphagia, FD, gastroparesis, dumping syndrome, chronic constipation, IBS and opioid-induced bowel dysfunction), the physiology and pharmacology of the enteric nervous system, GI hormones and the control of satiation and food intake. He has published more than 600 articles and 40 book chapters on various aspects of scientific and clinical gastroenterology.

Professor Tack won several awards for Basic and Clinical Research in GI Science. Professor Tack is Editor-in-chief of the United European Gastroenterology Journal, Past-President of the European Society of Esophagology, Past-President of the International Society for Diseases of the Esophagus, and has served as co-editor for Neurogastroenterology and Motility, Gastroenterology, Gut and Digestion. He serves or has served as a member of the editorial board of Gastroenterology, American Journal of Gastroenterology, Alimentary Pharmacology and Therapeutics, Journal of Internal Medicine, Bailliere’s Best Practice and Research in Clinical Gastroenterology, Annals of Gastroenterology and Journal of Gastroenterology.

William E. Whitehead, PhD
Professor of Medicine and OBGYN
Co–Director, UNC Center for Functional GI and Motility Disorders
Division of Gastroenterology and Hepatology
UNC School of Medicine
Chapel Hill, NC, USA

Dr. Whitehead served on the board of the Rome Foundation since 1992. He is Chair of the Research Committee and a member of the Executive, Finance, Editorial committees, and the Steering Committee of the Global Epidemiology of Functional Gastrointestinal Disorders Study. He also chaired the Questionnaire Development Committee for Rome IV and is now co-chairing (with Olafur Palsson) a global validation of the Rome IV criteria in 8 countries.

He is a clinical psychologist with additional training in gastrointestinal physiology who graduated from the University of Chicago in 1973. His current academic appointments are Professor of Medicine in the Gastroenterology and Hepatology Division at the University of North Carolina at Chapel Hill, Adjunct Professor of Obstetrics and Gynecology in the Urogynecology Division, and Director of the Center for Functional Gastrointestinal and Motility Disorders.

Dr. Whitehead is a full-time clinical researcher with continuous NIH funding since 1978. Research interests include the pathophysiology and treatment of irritable bowel syndrome (IBS), fecal incontinence, and constipation. His IBS studies focus on visceral pain sensitivity, genetics, diagnostic criteria, and the co-morbidity of IBS with other somatic and psychiatric disorders. His pelvic floor research encompasses the epidemiology, pathophysiology, and treatment of constipation and fecal incontinence with biofeedback, behavioral training, and drugs. Major contributions have included randomized controlled trials (RCTs) of biofeedback for disordered defecation, proctalgia, and fecal incontinence.

Services to the NIH include being co-chair of an NIDDK workshop entitled “Developing a Clinical Research Agenda for Fecal Incontinence,” member of the Data Safety and Monitoring Board for the NIDDK Gastroparesis Research Network, and member of the External Expert Panel for the NIDDK’s Managing Abdominal and Pelvic Pain Research Network. Dr. Whitehead is a Master of the American College of Gastroenterology and a Fellow of the American Gastroenterological Association.
Diane Austin  
**Executive Assistant to the President**  
Ms. Austin has more than 20 years of experience as a paralegal with extensive experience performing legal research, report writing, developing presentations, drafting correspondence, event management, drafting legal documents including briefs, appeals and agreements and preparing legal arguments and motions. She has worked in both law firms and world-wide corporations.

Eric Chapman  
**Information Technology Specialist**  
Eric Chapman has been working in Information Technology formally since 1999. He has worked in both the banking and medical industries. He has worked for Rome Foundation since 2007 and has been responsible for developing communication platforms and troubleshooting for the administrative group. He received a B.S. in Geographic Information Systems from Radford University in 1998.

Jamie DuMont  
**Exhibit Manager**  
Mrs. DuMont joined the Rome Foundation in 2009 to assist with exhibit booths at educational conferences. She brings over fifteen years of customer service and hospitality experience which will be utilized in her new role as Trade Show Manager. She is responsible for coordinating exhibits, welcoming visitors, sharing educational material about Rome Foundation’s mission, and finding new opportunities to ensure success and expand exhibition.

William Hilliard, Jr.  
**Director of Finance**  
Mr. William “Wink” Hilliard, Jr. of Hilliard Association Management joined the Rome Foundation as its Executive Director in January 2011. Mr. Hilliard handles the business operations and represents the Foundation in its many activities including coordinating sponsor related contracts, financial reports, fund raising and distribution of our books and educational products.  
Mr. Hilliard is a graduate of the University of North Carolina in Chapel Hill and received an MBA from the University of Virginia, where he held an academic position in Corporate and Divisional Strategic Planning. His experience has involved the management of several medical organizations including the NC Society of Anesthesiologists, the NC Society of Internal Medicine, and the NC College of Emergency Physicians. He has extensive experience in meeting management and the provision of financial services including portfolio management.
Ceara Curran Owre  
Web and Graphic Designer

Ceara Owre began working with the Rome Foundation in 2007. She runs her own design company, Ceara Owre Design, based in Chapel Hill, NC. Ceara received her B.A. in fine arts from St. Michael’s College, Vermont, and has studied at the Royal College of Art, London. She currently manages the Rome Foundation website and design of it’s bi-annual newsletter, *Rome Foundation Reporter*.

Chaitanya Pabbati, MD  
Educational Media Consultant

Chaitanya Pabbati was raised in Seattle and completed his undergraduate studies at the University of Washington, followed by his medical training at the Mayo Clinic. During this time, Chaitanya began to engage in research in suicide epidemiology and worked in public policy to provide psychiatric care to low-income populations. During his psychiatry residency at UC San Diego, Chaitanya has continued to work on suicide epidemiology, focusing on mental illness among healthcare professionals. Chaitanya is also currently the resident and fellow representative for the state of California to the American Psychiatric Association, with his role focusing on increasing transparency and ease of process. His work for the ROME Foundation has been to serve as a technology consultant, currently completing work on an iPad app for the ROME algorithms, and facilitating the development of an interactive module to combine the algorithms with the MDCP.

Ms. Claudia Rojas  
Administrator

Ms. Claudia Rojas is our administrator representative for Latin America. 

Ms. Rojas is originally from Cúcuta, Colombia and has enjoyed a career in the hospitality and marketing industries. She has a heart for the Hispanic community and is currently the program manager for the Center for Latino Health (CELAH), at the University of North Carolina in Chapel Hill, which she helped develop with Douglas Morgan MD. 

She serves as the translator for Rome materials into Spanish, assists with communications and membership programs (especially as they relate to the Hispanic community), and provides meeting support for Rome meetings, trade shows and exhibits.

Ceciel Rooker  
Executive Director

Ms. Rooker joined the Rome Foundation in early 2008 to assist with marketing and public relations. She is responsible for branding as well as all print materials for the organization. Working with the President and the Board of Directors, she serves as a liaison with industry contacts as well as potential sponsors. She also organizes all public aspects of the Rome Foundation; including working with Jamie DuMont the Trade Show manager to coordinate exhibit booths at educational conferences. Ms. Rooker coordinates Clinical Symposia and lectureships, major medical conferences such as at DDW and UEGW and serves as the Managing Editor of *Rome IV*. 

www.theromefoundation.org
Mark Schmitter
Marketing Director

Mark is a graduate of the University of Georgia in marketing and, for the last 25 years, has worked as account supervisor or consultant with prestigious companies like Saatchi and Saatchi, ICC, and Cline Davis & Mann. His expertise has been in the concept development, creation and implementation of various pharmaceutical products including those in gastroenterology, as well as other medical areas.

Mr. Schmitter is currently developing our strategic marketing plan for Rome IV. He is also serving as contact person for academicians and industry sponsors with regard to international translations and bulk sales orders.

Jerry Schoendorf
Medical Illustrator

Jerry Schoendorf is a medical illustrator and anaplastologist who has worked on many clinical teaching slide projects for the American Gastroenterological Association and on Rome II, Rome III and the Computer-based Learning Program for the Functional GI Disorders. He has directed and coordinated media and art departments at the Rehabilitation Institute of Chicago and at Duke University Medical Center and has recently retired from private practice in Durham, North Carolina.

Emily Taylor
Administrator

Emily Taylor and her husband Alex have recently moved back from Oregon, and rejoined the Rome Foundation permanently in the fall of 2015. Since then Emily has taken over coordinating the Professorship/Lectureship program. She will be traveling several times this year to promote the Rome IV books at our booths all around the world. Emily graduated with a Biological Sciences degree from North Carolina State University. She is also a certified dog groomer and enjoys teaching horseback riding lessons.
Advisory Council

Communications of an academic nature involving the Rome Foundation with the pharmaceutical industry are conducted through the Rome Advisory Council. The Advisory Council consists of representatives of all Rome Foundation sponsors, Rome Board members, the American Gastroenterological Association (AGA), the International Foundation for Functional Gastrointestinal Disorders (IFFGD) and representatives of interested scientific and regulatory agencies. Each year the Advisory Council meets to discuss present ongoing Foundation activities and topics of general interest. Members also prepare presentations of general interest to the members for discussion at these meetings.

Members of the Advisory Council (through 2015)

- Allergan, Plc.
- Almiral S.A.
- Ardeleyx
- Astellas Pharma Global Development, Inc.
- Astrazeneca LP
- Danone Nutricia Research
- Ferring International Pharmaceuticals
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- Ironwood Pharmaceuticals
- Ono Pharmaceuticals UK
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- QOL Medical
- Shionogi
- Shire Pharmaceuticals
- Sofar S.p.A.
- Sucampo AG
- Synergy Pharmaceuticals
- Valeant/Salix
- Takeda Pharmaceuticals International, Inc.
- Zeria Pharmaceutical Co., Ltd

The Associates of Rome program has grown to well over 1230 members in 78 countries since its inception in 2010.

Members are enjoying benefits such as:

- Discounts on Rome products
- Quarterly newsletters
- Conference registration discounts
- Certificate of Association
- Rome Foundation pin
- Printed copy of “Rome III Diagnostic Algorithms for common Common GI Symptoms”

New Associates Benefit!
All Associates of Rome are eligible to download individual slides from the Computer-Based Learning Program (CBLP) for FREE from our website.

Please contact emily@theromefoundation.org for more information on both opportunities.
After five years of hard work by over 120 investigators and clinicians, Rome IV is launching at the 2016 Digestive Disease Week conference (DDW 2016). Representing the collective efforts of the world’s best minds in FGIDs research and care, Rome IV offers the latest update to The Rome Foundation’s acclaimed diagnostic criteria backed by a host of products designed to implement and complement our unique and effective approach to understanding and treating FGIDs.

**Rome IV Educational Materials and Resources—A Complete Toolkit for FGIDs Research, Diagnosis, and Treatment**

The main goal of Rome IV is to increase the applicability in research and clinical settings of the Rome Foundation’s two-decade long investigation into disorders of the GI system that are now called “disorders of gut-brain interaction”. While understanding FGIDs—their origins, symptoms, and treatment—is critical, it is equally important that this understanding can be put into practice. We are pleased that Rome IV helps us achieve this goal with updates of previous versions of the Rome Foundation’s publications, and exciting new products to expand our reach and improve more patients’ lives.

Beginning with an update from the last publication 10 years ago, comes the fourth edition of our overview and diagnostic criteria for FGIDs, *Rome IV Functional Gastrointestinal Disorders – Disorders of Gut-Brain Interaction*. With several new chapters, updates in pathophysiology and new diagnostic and treatment recommendations Rome IV is a welcome edition to aid in complete learning of the FGIDs. In addition there are 5 additional books:

- **Rome IV Multidimensional Clinical Profile for Functional Gastrointestinal Disorders**, the second edition of our unique case-based learning module for putting the Rome approach to FGIDs care into practice we use a multicomponent approach to treatment taking into consideration not just the diagnosis, but meaningful clinical subset information, impact of the disorder, psychosocial comorbidities and physiological features including biomarkers, all as part of a case based approach. Now there are more than double the number of cases compared to the first edition.

- **Rome IV Diagnostic Algorithms for Common GI Symptoms** is the second edition of our useful algorithmic approach to evaluating common GI symptoms. It is designed to aid clinicians by guiding them through a logical pathway to diagnosis. It features new sets presenting symptoms and also algorithms pediatrics.

- **Rome IV Functional Gastrointestinal Disorders for Primary Care and Non-GI Clinicians** (NEW!) provides access of Rome IV information to doctors on the front lines of clinical care as well as other non-gastroenterological physicians. Indeed, the Rome Foundation philosophy and approach to FGIDs is modified into more concise information to meet the needs of the busy non-specialist clinician.

- **Rome IV Pediatric Functional Gastrointestinal Disorders – Disorders of Gut-Brain Interaction** (NEW!) provides in one volume all the information that will help clinicians navigate the difficult diagnostic conditions presented by young patients and their families. The book contains the Rome IV clinical chapters, the pediatric diagnostic algorithms and MDCP cases as well as questionnaires and criteria for diagnosis.

- **Rome IV Diagnostic Questionnaires and Tables for Investigators and Clinicians** (NEW!) provides the framework for further epidemiological and clinical research on FGIDs according to the Rome IV criteria.

- **Rome IV Slide Sets**, will provide unique learning and information dissemination tools for researchers and clinicians engaging with the Rome IV criteria. Both a comprehensive *Rome IV Computer-Based Learning Program* slide set, and one tailored to our case study approach, the *Rome IV MDCP* slide set will be available upon the Rome IV launch.

**Rome Foundation and LogicNets® Strategic Partnership.**

The Rome Foundation has formed a strategic partnership with LogicNets®, the developer of an intelligent decision-support automation platform. With their assistance the Foundation is finalizing an online system to blend the *Rome IV Diagnostic Algorithms for Common GI Symptoms* and the *Rome IV Multidimensional Clinical Profile for FGIDs* into a software module that will allow the clinician to use advanced methods to diagnose and treat FGIDs.
It is expected that this program will aid practitioners around the world to successfully access Rome expertise, diagnose and treat patients, increase their own knowledge and credentials, and contribute to outcomes-based learning facilitated by the constantly learning system. Beta testing has just begun and we anticipate having modules available for general use later this year.

**NEW MARKETING AND PUBLICITY INITIATIVES**

The Rome Foundation is pleased to announce the hiring of a new marketing manager, Mark Schmitter, and the unveiling of our new website and logo. In addition to our new logo we have also launched a newly redesigned website. These developments will help us identify clinicians and researchers who would benefit from *Rome IV*, find new partners to expand our reach, and streamline our information for our customers, while updating our look to match a contemporary aesthetic.

**MULTIPLELaunches**

After DDW 2016, the Rome Foundation will be bringing the full complement of *Rome IV* products and resources to the international GI community to maximize our visibility and reach new audiences.

*Rome IV has launched and we couldn’t be more excited!*

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**CHAPTER COMMITTEES**

<table>
<thead>
<tr>
<th><strong>FUNDAMENTALS OF NEUROGASTROENTEROLOGY: Basic Science (Kellow)</strong></th>
<th><strong>FUNDAMENTALS OF NEUROGASTROENTEROLOGY: Physiology/Motility-Sensation (Whitehead)</strong></th>
<th><strong>INTESTINAL MICROENVIRONMENT AND FGIDs (Chey)</strong></th>
<th><strong>PHARMACOLOGICAL PHARMACOKINETIC AND PHARMACOGENOMIC ASPECTS OF FGIDs (Tack)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>David Grundy, MD, Chair (UK) Stephen Vanner, MD, Co-Chair (Canada) Beverly Greenwood-Van Meerfeld, PhD (US) Gary M. Mawe, PhD (US) Tereza Shea-Donahue, PhD (US) Elena Verdu, MD, PhD (Canada) Jackie D. Wood, PhD (US)</td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>AGE, GENDER AND WOMEN’S HEALTH AND THE PATIENT (Chang)</strong></th>
<th><strong>MULTICULTURAL ASPECTS OF FGIDs (Chang)</strong></th>
<th><strong>BIOPSYCHOSOCIAL ASPECTS OF FUNCTIONAL GASTROINTESTINAL DISORDERS (Dressman)</strong></th>
<th><strong>ESOPHAGEAL DISORDERS (Tack)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Margaret M. Heitkemper, PhD, Co-Chair (US) Lesley A. Houghton, PhD, Co-Chair (UK) Michael D. Crowell, PhD (US) Anton Emanuel, MD (UK) Albena Halpert, MD (US) James A. McRoberts, PhD (US) Brenda B. Toner, MD (Canada)</td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>GASTRODUODENAL DISORDERS (Chey)</strong></th>
<th><strong>BOWEL DISORDERS (Tack)</strong></th>
<th><strong>CENTRALLY MEDIATED DISORDERS OF GI PAIN (Kellow)</strong></th>
<th><strong>GALLBLADDER AND SPHINCTER OF ODDI DISORDERS (Kellow)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Nicholas J. Talley, MD, PhD, Chair (Australia) Vincenzo Stanghellini, MD, Co-Chair (Italy) Francis K. L. Chan, MD (China) William L. Hasler, MD (US) Juan Malagelada, MD, PhD (Spain) Hidekazu Suzuki, MD, PhD (Japan) Jan Tack, MD, PhD (Belgium)</td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>ANORECTAL DISORDERS (Whitehead)</strong></th>
<th><strong>CHILDHOOD FGIDs: NEONATE/ TODDLER (Chang)</strong></th>
<th><strong>CHILDHOOD FGIDs: CHILD/ ADOLESCENT (Chey)</strong></th>
<th><strong>DESIGN OF TREATMENT TRIALS FOR FGIDs (Whitehead)</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Adil E. Bharucha, MD, Chair (US) Satish S. C. Rao, MD, PhD, Co-Chair (US) Giuseppe Chiaroni, MD (Italy) Richelle Felt-Bersma, MD, PhD (Netherlands) Charles H. Knowles, PhD (UK) Allison Malcolm, MD (Australia) Arnold Wald, MD (US)</td>
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<td>Brennan Spiegel, MD, Chair (US) Jan E. Irvine, MD, Co-Chair (Canada) Jan Tack, MD, PhD, Co-Chair (Belgium) Michael Crowell, PhD (US) Kok-Ann Gwee, MD, PhD (Singapore) Meiyun Ke, MD (China) Max Schmulson, MD (Mexico) William W. Whitehead, MD (US)</td>
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* CHAPTER ASSOCIATE EDITOR
The Rome IV criteria, which are translatable into languages and validated through cooperation with primary care physicians and health care extenders, provide a powerful tool for the accurate diagnosis and treatment of functional gastrointestinal disorders (FGIDs). The Rome IV criteria are designed to be used in a fashion that is beneficial to health care extenders, with the goal of improving patient outcomes.

The Rome IV criteria are the result of multinational research and formulate recommendations for FGID research from a cross-cultural perspective. They are designed to be integrated into clinical practice and facilitate patient care extenders. The Rome IV criteria are also intended to be translated into languages and validated through cooperation with primary care physicians and health care extenders.

To facilitate multinational research in the FGIDs, Rome IV conducts a multinational survey using standardized methodology and provides recommendations for the development of Rome IV criteria that are more inclusive for Asian patients.

The Rome IV criteria are designed to help study and describe the nature of FGIDs and to help with appropriate therapeutic decisions. Rome IV has been developed to better understand and address the diagnostic criteria for FGIDs.

The Rome IV criteria are designed to be used in a fashion that is beneficial to primary care physicians and health care extenders. They are intended to be adapted to the practice settings in which they will be used, and to be integrated into clinical practice.

The Rome IV criteria are intended to provide a more inclusive approach to the diagnosis of FGIDs, allowing for a more accurate and comprehensive understanding of these conditions.

The Rome IV criteria are also intended to be used in a way that is beneficial to patients, with the goal of improving patient outcomes.

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The latest development in the global initiative is the establishment by the Rome Board of Directors of a Global Committee, chaired by Dr. Ami Sperber to coordinate all activities on the global level and to collaborate with other committees established by the Board of Directors such as the Education and Research committees. The structure of the Global Committee is depicted in Fig. 2. As can be seen in this figure the International Liaison Committee (ILC), chaired by Dr. Dan Dumitrascu, now plays a central role in global projects as discussed below.

1) International Liaison Committee (ILC) and International Associates Program
The ILC is composed of representatives from different regions of the world. It will now be organized on a regional basis with the following regions working semi-autonomously under ILC auspices to promote the Rome Foundation global initiative in each region:
- Eastern Europe
- Asia
- Africa
- Middle East
- Latin America
- Western Europe, North America, Australia/New Zealand

2) RF Translation Project
- Provide quality, validated translations of RF material into as many languages as possible, in particular the Rome III and Rome IV books, diagnostic questionnaires, clinical algorithms, multi-dimensional clinical profile (MDCP).
- Recently, other RF-held questionnaires, notably the IBS-SSS (IBS symptom severity scale) and the Celiac Disease Quality of Life questionnaire (CD-QOL) are being translated into multiple languages.
- Establish regulations for the licensing and use of Rome material in the framework of academic research and commercial clinical trials.

Beginning in June 2016 we will be overseeing the translation of the new Rome IV material (book, diagnostic questionnaires into over 20 languages, and of the new Rome IV book and the other Rome IV material into multiple languages.

The translation project website can be seen at: www.theromefoundation.org/products/rome-translation-project/.

The following are available on the website:
- Downloadable RF translation guidelines (updated in February 2014).
- A request form for translated material.

Continued on page page 18
3) IBS Global Perspective Conference
This conference, initiated by the RF and organized in collaboration with the WGO, was held in Milwaukee, WI in April 2011. It was co-chaired by Drs. Sperber and Eamonn Quigley. Over 100 participants from around the world, including gastroenterologists, psychologists, nurses, and other health care providers, attended the meeting.
Among the aims of the meeting were to:
- Foster greater interest in the global aspects of IBS.
- Foster the development of cross-cultural competence in the clinical and research arenas.
- Foster international research networks and improve the quality of multinational research in IBS.
A summary of the conference was published in the Red Section of AJG (Am J Gastroenterol 2012;107:1602–1609). The article is online at www.nature.com/ajg/journal/v107/n11/pdf/ajg2012106a.pdf.

4) RF Working Team on Cross-cultural, Multinational Research in FGIDs.
This working team, chair by Dr. Sperber and comprised of 18 members and consultants from all around the world, completed its major task and published a final report in January 2014. This report is available for download at: www.theromefoundation.org/working-teams-and-committees/multinational-committee/. It has also published three scientific papers in the medical literature. Please see the section of RF Working Teams on page 30 for full details on this working team.

5) RF Asian Working Team
The Asian working team committee, chaired by Dr. Kok-Ann Gwee from Singapore and co-chaired by Dr. Whitehead, has completed an extensive literature review and is currently coordinating an Asian multinational survey to obtain data that will help in the development of the Rome IV criteria. This data will broaden understanding of FGIDs and strengthen the diagnosis and treatment of FGIDs in Asia.
The working team aims are:
- Design a trans-Asian survey.
- Develop and validate translations of survey instruments in Asian languages.
- Carry out a survey of 200+ patients with a clinical diagnosis of IBS and 200+ with functional dyspepsia drawn from clinic sites in participating Asian countries.
- Develop and publish recommendations for Rome IV and/or supplements to Rome III that are appropriate for Asian patients
This working team has already published several papers reporting the results of its work.

6) Rome IV book chapter on Cross-cultural aspects of FGIDs
This is a new chapter, which expands on material that appeared in the Rome III book on “Gender, Age, Society, Culture, and the Patient’s Perspective in the Functional Gastrointestinal Disorders.” The chapter committee membership reflected the global membership of the Rome Foundation and the chapter drew on material provided by the Working Team. The chapter committee has completed its work and prepared the chapter for the Rome IV book, the online version of the book, and an article for the special issue of Gastroenterology devoted to Rome IV, which has already appeared.

7) A Global Epidemiology Study of FGIDs
Achieving a clear picture of the epidemiology of FGIDs is very problematic, as discussed in detail in the recent Rome Foundation working team paper published in Gut (Sperber et al. The global prevalence of IBS in adults remains elusive due to the heterogeneity of studies: a Rome Foundation working team literature review. 2016 (E-pub ahead of publication).

THE COUNTRIES TO BE STUDIED IN THE EPIDEMIOLOGY STUDY

The aims of the present study are to:
- To conduct a Rome Foundation-sponsored multinational, collaborative global study of the epidemiology of IBS using the Rome IV questionnaire.
- Base the study design on the recommendations of the RF Working Team on Multinational, Cross-cultural Research.

Fig. 3. Timeline for proposed project
The global study will be preceded by the phases described below and depicted in the timeline in Fig. 3.

Development of the original English language questionnaire by the Rome IV questionnaire committee chaired by Dr. William Whitehead and co-chaired by Dr. Olafur Palsson.

- The original English version of the Rome IV diagnostic questionnaire has already undergone translatability assessment for 9 languages.
- Following validation the English version will be translated into multiple languages. The translation process will include cognitive debriefing for cultural validation. At the first stage it will be translated into 20 languages.
- The translated versions will then undergo clinical validation in 8 countries.

**The global study project will include:**

**Phase 1: Executive committee**
An executive committee, composed of leaders in the field from around the world, has been planning this study since 2013. It has:
- Planned the overall study design and protocol.
- Determined the countries to be included in the study.
- Proposed a consortium of investigators from the participating countries.
- Included a statistician/methodologist to ensure an appropriate study design from the outset.

**Phase 2: Translation of the Rome IV questionnaire**
- Once the translations are completed and validated the study will be conducted in 35 countries from around the world.

**Phase 3: Conduct of the Study**
- The translated versions will then undergo clinical validation in 8 countries.
- Once the translations are completed and validated the study will be conducted in 35 countries from around the world.

**Phase 4: Analysis of results and publication**
- Anticipated outcomes:
  - A clearer picture of the global epidemiology of FGIDs, using uniform and appropriate cross-cultural research methodology.
  - Enhanced understanding of FGID pathophysiology.
  - Publication of the study results at the local, regional, and global levels.
  - Validation of the new *Rome IV* diagnostic criteria

Validated translations of the Rome IV questionnaires into multiple languages approved by the RF for future academic and commercial research on IBS and the other FGIDs.

8) **RF International Programs and Symposia**
In September 2012, the RF was invited to present symposia on its activities in Sanya Island and Beijing. The highlight of the Beijing meeting was the dedication of the RF and North American Education Foundation wing within the Chinese PLA Hospital (the world’s largest hospital with 6500 beds). Arrangements have been made for Foundation members to educate Chinese gastroenterologists through future symposia and workshops. Dr. Yunsheng Yang, Chief of Gastroenterology at the hospital and President of the Chinese Society of Gastroenterology, presided at the dedication ceremony.

The RF is now working towards developing similar collaborations with leaders in FGIDs and gastroenterology associations in other regions of the world.

Continued on page 20
Summary of Rome Foundation Global Initiative

The RF has developed a multi-faceted initiative to promote global research into and understanding of the FGIDs. The expected results are:

- A formal report by the working team on the methodology and conduct of cross-cultural, multinational research in FGIDs.
- A large body of translated and validated Rome IV questionnaires and other material in multiple languages.
- A chapter in the Rome IV book on the “Cross-cultural aspects of the FGIDs”
- A global study of IBS epidemiology
- Dissemination of RF educational material throughout the world in multiple languages
- Establishment of training centers in eligible sites around the work to promote understanding of the FGIDs and the clinical application approach to their diagnosis and management.

Copyright and Licensing

The Rome Foundation has a copyright policy and licensing fee schedules for usage of its copyrighted instruments and available translations. In 2010 the Rome Foundation created a copyright committee consisting of John Kellow MD, Magnus Simrén, MD, PhD, and Ami Sperber, MD. At this time we have the following instruments (available in English unless otherwise marked):

- Rome III Diagnostic Questionnaires (Rome III Diagnostic Questionnaire for the Adult Functional GI Disorders, including individual modules and scoring algorithm; Rome III Diagnostic Questionnaire for the Pediatric Functional GI Disorders; Rome III Psychosocial Alarm Questionnaire for the Functional GI Disorders). Visit www.theromefoundation.org/products/rome-translation-project/available-translations/ to see available translations for these tools.
- Computer Based Learning Program for the Functional GI Disorders, including individual modules
- Understanding the Irritable Gut (Thompson WG, 2008)
- Clinical Diagnostic Algorithm program, including individual modules or algorithms
- Bristol Stool Form Scale (BSFS) Additional translations - Spanish, Korean
- Celiac Disease - Quality of Life survey (CD-QOL) Additional translation – Dutch, Japanese, Portuguese
- Functional Bowel Disorders Severity Index (FBDSI)
- Irritable Bowel Syndrome - Quality of Life survey (IBS-QOL) Additional translations — Afrikaans, Arabic, Bengali, Bulgarian, Cantonese, Chinese, Czech, Danish, Dutch, Finnish, French, German, Gujarati, Hebrew, Hindi, Hungarian, Italian, Kannada, Korean, Latvian, Malay, Malayalam, Mandarin Chinese, Marathi, Norwegian, Panjabi, Polish, Portuguese, Romanian, Russian, Slovak, Spanish, Swedish, Tamil, Thai, Telugu, Ukrainian, Urdu
- Irritable Bowel Syndrome - Symptom Severity Scale (IBSSSS) Additional translations - Bulgarian, Chinese, Czech, French, German, Hungarian, Italian, Korean, Latvian, Norwegian, Polish, Romanian, Russian, Slovak, Spanish, Swedish
- Rating Form of Irritable Bowel Disease Patient Concerns (RFIPC) Additional translations – Afrikaans, Arabic, Bosnian, Bulgarian, Croatian, Czech, Estonian, French Canadian, German, Greek, Hebrew, Italian, Japanese, Portuguese, Romanian, Russian, Serbian, Slovak, Spanish, Swedish, Ukrainian, Turkish
- Comorbid Medical Conditions Questionnaire (CMCQ)
- Satisfaction with Care Scale (SAT-37)
- Trauma Questionnaire
- Ulcerative Colitis and Crohn’s Disease Health Status Scales (UC-CD)

Beginning in 2016, we will be adding the Rome IV questionnaire and related Rome IV products. Please note that Rome Foundation sponsors and academicians not funded by industry or federal grants are licensed at no charge. For more information, please contact Diane Austin at daustin@theromefoundation.org.
The Rome Foundation pediatric Subcommittee on Clinical Trials

The Rome Foundation is pleased to have begun collaboration with the Pediatric Committee of the European Medicines Agency (EMA) to help develop recommendations for endpoints and outcomes and the conduct of clinical trials for pediatric patients with FGIDs. The subcommittee of the Rome IV Design of Treatment Trials Committee with the participation of Jan Tack, MD, PhD (Rome Foundation Board), Jan Taminiau, MD (EMA – Pediatric Committee), Miguel Saps, MD (Chair Rome Foundation Pediatric Subcommittee on Clinical Trials, Rome IV Child-Adolescent Committee), Marc Beninga, MD, PhD (Rome IV Neonate-Toddler committee), Miranda Van Tilburg, PhD (Rome IV Child-Adolescent Committee), John Lavigne PhD and Adrian Miranda, MD, has finalized the first document. The document upon approval by the Board of the Rome Foundation was submitted for publication and consideration of the Pediatric Committee of the European Committee for Medicinal Products for Human Use (CHMP). The document will be included in the Rome IV Design of Treatment Trials online publication.

Committee Composition:

- Miguel Saps, MD, Chair (USA)
- Jan Taminiau, MD, PhD (Netherlands)
- Jan Tack, MD, PhD (Belgium)
- John Lavigne, PhD (USA)
- Miranda van Tilburg, PhD (USA)
- Adrian Miranda, MD (USA)
- Carlo di Lorenzo MD (USA)
- Marc Beninga MD (Netherlands)
Publication of the Rome IV proceedings in the May issue of Gastroenterology represents the tireless efforts of countless committee members, staff and editorial board members. This achievement should not be viewed as an end to the Rome IV process. The hard work of dissemination and sharing of the Rome IV work products with the world will be the charge of the Launch Committee.

Members of the launch committee include William D. Chey (chair), Lin Chang, Giovanni Barbara, Douglas A. Drossman, and Jan Tack.

The Launch Committee has created a comprehensive plan which includes a multi-pronged approach:

1. **ROME IV LAUNCH MEETING AT DDW**
   Major US launch will be facilitated through a strategic partnership with AGA at DDW 2016.

   **AGA – Rome Symposium**
   **Symposium Title: The Launching of Rome IV: What’s New and Why**
   Moderators: Lin Chang, Doug Drossman
   - Overview of Rome IV: Changes in criteria and new educational concepts — Douglas A. Drossman, MD
   - Functional Gastrointestinal Disorders — Nicholas Talley, MD, PhD
   - Lower Gastrointestinal Functional Bowel Disorders — Fermín Mearin, MD, PhD

   **Satellite Symposium on IBS during which Rome IV will be discussed – Global Medical Education**
   **Irritable Bowel Syndrome – What’s New?**
   - Introductions and Optimizing the Patient’s “A Day in the Life” With IBS Through Effective Communication Skills — Douglas A. Drossman, MD
   - Insights Into the Pathophysiologic Basis of IBS — Magnus Simren, MD, PhD
   - Establishing the Diagnosis of IBS via Rome Diagnostic Algorithms — Brian E. Lacy, MD, PhD
   - Using the Multidimensional Clinical Profile in Developing Treatment Strategies for IBS — Anthony J. Lembo, MD
   - Medically Speaking™ Q&A Panel Discussion

2. **OTHER ROME IV LAUNCH MEETINGS**
   **APNM 2016, Seoul Korea - April, 2016**
   The 6th Asian Postgraduate Course on Neurogastroenterology and Motility in April will present a Rome–Korean Society of Neurogastroenterology and Motility symposium with three lectures:
   - Rome IV Criteria for FGIDs: Is There a Need for Better Definitions? — William D. Chey, MD
   - Global Issues in FGIDs: How Do Epidemiological Differences in Western and Eastern Societies Affect Diagnosis and Management? — Ami D. Sperber, MD

   **Japanese Society of Psychosomatic Medicine, June 2016**
   In June at the JSPM, Dr. William Whitehead will present Rome IV and Biopsychosocial Aspects of IBS.

3. **PROVIDE NEW ROME IV INFORMATION FOR VISITING PROFESSORSHIP**
   **see pages 28-29 for more information**
   - All speakers will be provided with the Rome IV slideset
   - Talks will highlight the Rome IV criteria
   - Speakers will be encouraged to discuss MDCP and algorithms

4. **DISSEMINATION OF ROME IV INFORMATION THROUGH ENHANCED MARKETING AND PUBLICITY**
   - Organized approach to social media (Facebook, Twitter, Instagram)
   - Pursue interviews about Rome IV with medical and lay press

5. **SOLICIT BOOK REVIEWS FROM SELECTED GI AND PRIMARY CARE JOURNALS**
Research Program

The Rome Foundation has sponsored research by young investigators since 2007. The goals of the research program, chaired by William Whitehead, PhD, and Uday Ghoshal, MD, are three-fold: (1) to expand the amount of data available on the validity of the diagnostic criteria so that revisions to the criteria can be empirically based; (2) to increase knowledge of the epidemiology and pathophysiology of the functional gastrointestinal disorders (FGIDs); and (3) to interest young investigators in research and clinical practice in the area of functional gastrointestinal disorders (FGIDs) and motility disorders.

ROME-AGA RESEARCH AWARD

The Research Committee is charged with developing guidelines for an annual research award program, overseeing the process of soliciting applications and reviewing them, and monitoring progress of grants awarded through semiannual reports from awardees. Through a partnership with the American Gastroenterological Association, we award two grants of up to $50,000 annually to postdoctoral research fellows, junior faculty, or established investigators seeking to develop new areas of research.

Applications may address any aspect of functional gastrointestinal and motility disorders from basic science to clinical diagnosis, treatment, health care delivery, epidemiology, or validation of the Rome diagnostic criteria. Basic and translational research applications should describe the relevance to the diagnosis and management of functional GI and motility disorders. Applications are submitted to the AGA and are reviewed by an independent panel of AGA and Rome Foundation appointed scientists. Rome Board members are not eligible to apply. Grants awarded in previous years are as follows:

2016 – TWO AWARDS
Principal Investigator: Izumi Kaji, PhD (USA)
Title: Enteric neural FFA3 activation regulates colonic motility.
Principal Investigator: Ans Pauwels, MPharmSc, PhD (Belgium)
Title: Is refractory gastro-esophageal reflux disease a disease spanning the organic-functional spectrum? Role of visceral hypersensitivity.

2015 – TWO AWARDS
Principal Investigator: Miranda van Tilburg, PhD (USA)
Title: Validation of the pediatric Rome IV criteria.
Principal Investigator: Madhusudan Grover MBBS (USA)
Title: Barrier function alterations in post-infectious irritable bowel syndrome.

2014 – TWO AWARDS
Principal Investigator: Stacy Menees, MD, MS (USA)
Title: A randomized controlled trial to assess the efficacy of the low FODMAP diet in patients with fecal incontinence and loose stools.

Principal Investigator: Kok Ann Gwee, FAMS, FRCP, PhD (Singapore)
Title: The Chinese and Caucasian Brain Study: A neuroanthropological evaluation of the ROME III criteria.

2013
Principal Investigator: Maria Vicario, PhD (Spain)
Title: Identification of signaling pathways and active biological networks associated with the role of eosinophils in stress-induced exacerbations of IBS.

2012
Principal Investigator: Nicholas J. Talley, MD, PhD (Australia)
Title: Usefulness of Rome III symptoms, psychological characteristics and cytokines in accurately diagnosing FGIDs.

2011
Principal Investigator: Lars Agreus, MD, PhD (Sweden)
Title: Functional dyspepsia and functional heartburn: Natural history of symptoms in the general population and validity of Rome III upper gastrointestinal diagnostic criteria.

2010
Principal Investigator: Javier Santos Vicente, MD (Spain)
Title: Role of mucosal eosinophils in the physiopathology of intestinal inflammation in irritable bowel syndrome.

2009
Principal Investigator: Miranda van Tilburg, PhD (USA)
Title: Validation of the Child/Adolescent Rome III Criteria.

2008
Principal Investigator: Madhulika Varma, MD (USA)
Title: Comprehensive validation of the Rome III constipation module.

RAY CLOUSE AWARD FOR THE BEST PAPER

The Rome Foundation established an award in memory of Ray E. Clouse, MD a gastroenterologist and scholar at Washington University School of Medicine and a devoted member of the Rome Foundation. Ray’s academic career spanned 27 years of research, teachings and writings that has left an indelible mark in the field of functional gastrointestinal and motility disorders and of gastroenterology in general.

The Rome Foundation will present a $1000 prize to the first author of the best research article published in the field of Functional Gastrointestinal or Motility Disorders for the preceding calendar year. This prize will be presented at the current year’s Rome Foundation Reception at DDW. The following individuals have been winners of the Ray Clouse Prize:

2016
Talley NJ, MD, PhD (Australia)

2015
Annette Fritscher-Ravens, MD, PhD (Germany)
Title: Confocal endomicroscopy shows food-associated changes in the intestinal mucosa of patients with irritable bowel syndrome. Gastroenterology 2014; 147:1012-20. PMID: 25083606.

Continued on page 24
RAY CLOUSE AWARD FOR THE BEST PAPER

Winners continued

2014 – Two winners

Kirsten Tillisch, MD (USA)
Title: Consumption of fermented milk product with probiotic modulates brain activity. Gastroenterology 2013;144:1394-401. PMID 23474283.

Maria Vazquez-Roque, MD (USA)

2013

Mats B.O. Lowen (formerly Larsson), MD, PhD (Sweden)

2012

Nathalie Bertiaux-Vandaele, (France)
Title: The expression and the cellular distribution of the tight junction proteins are altered in irritable bowel syndrome patients with differences according to the disease subtype. Am J Gastroenterol 2011;106:2165-73. PMID: 22008894.

2011 – TWO WINNERS

QiQi Zhou, MD, PhD (USA)

Tamira K Klooker, MD (Netherlands)

2010

Hanneke Beaumont, MD, PhD (Netherlands)
Title: The position of the acid pocket as a major risk factor for acidic reflux in healthy subjects and patients with GORD. Gut 2010;59:441-51. PMID: 19651625.

2009 – TWO WINNERS

Anurag Agrawal, PhD, MRCP (UK)

John E. Pandolfini, MD (USA)

2008

Krisztina Gecse, MD (Hungary)

KEN HEATON AWARD FOR MOST CITED PAPER

The Rome Foundation also offers a $1000 prize for the most frequently cited research paper on functional gastrointestinal and motility disorders. This award is named in honor of the late Kenneth Heaton for his ground-breaking contributions to the development of positive diagnostic criteria for irritable bowel syndrome (the Manning Criteria) and the pathophysiology of constipation (the Bristol Stool Scale). Dr. Heaton (1936 - 2013) was a Consultant Physician at the Bristol Royal Infirmary, and Reader in medicine at the University of Bristol. The Rome Foundation Board of Directors selects this paper based on the Science Citation Index, and the winner is announced at Digestive Disease Week.

Articles on functional gastrointestinal and motility disorders published from January to December in the penultimate year before DDW and indexed in PubMed will be evaluated. Note that there is a one-year lag between the publication of the paper and its consideration for the prize; this is to allow enough time for the paper to be recognized and cited. This $1000 prize will be presented at the Rome Foundation Reception at DDW. Previous winners of this award are listed below:

2016

Emma P. Halmos, PhD. (Australia)
Title: A diet low in FODMAPs reduces symptoms of irritable bowel syndrome. Gastroenterology 2014;146:67-75. PMID:24076059.

2015

Jessica Biesiekierski, PhD. (Australia)

2014 – TWO WINNERS:

Madhusudan Grover, MBBS (USA)

Natasha Koloski, PhD (Australia)
The Rome Foundation has carried many roles since its inception but perhaps most important is its influence on the field with regard to the genesis and maturation of functional GI disorders. To understand this we must be clear on the distinction regarding classification of the various gastrointestinal disorders. As shown in Figure 1, we define disorders based on evident pathology (organic GI disorder), altered motility (motility disorder) or symptoms (functional GI disorder). Functional GI disorders are diagnosed by Rome criteria which are usually symptom based. Historically the functional GI disorders and as an example, IBS had its genesis about 25 years ago (Figure 2).

While gastrointestinal symptoms have been reported by individuals for millennia, the classification into syndromes first began with research on GI motility in the 1940’s and 1950’s. At this time notable GI physiologists like Stuart Wolf and Tom Almy attempted to correlate gut motility changes with symptoms. Motility research was dominant in the latter half of the 20th century. However by the late 1980’s it was becoming evident that motility alone was not sufficient to explain GI symptoms or symptom based disorders. A breakthrough occurred around 1990 with two new entries into the field. First was the research by William Whitehead, Emeran Mayer, and others who began to report the concept of visceral hypersensitivity, i.e., characterizing pain reports by what later was recognized as augmented afferent signaling rather than motility. The second was the classification system for functional GI disorders published in 1990 which evolved into the Rome Criteria. This symptom based classification categorized patients with various symptom patterns into diagnoses that were amenable to many re-search models as shown in Figure 2. This has had a major impact on our scientific understanding of these disorders. Currently the Rome criteria are used by regulatory agencies, investigators and clinicians round the world.

**Reference List**

Rome Foundation/AGA Institute Lectureships at DDW

In 2008, the Rome Foundation and the American Gastroenterological Association (AGA) launched a “prime time” lectureship at DDW with the goal to have outstanding speakers present on the broader areas of health care as related to the functional GI and motility disorders. In 2016, we are pleased to have three speakers discuss “The Launching of Rome IV: What’s New and Why”. The talks will be:

- Functional Gastroduodenal Disorders with Nicholas J. Talley
- Lower Gastrointestinal Functional Bowel Disorders with Fermin Mearin

Previous Lectures from this series are listed below:

- 2009: “Motility Assessments for Functional GI Disorders: How far does it get us?” with Dr. Juan-R. Malagelada, Professor of Gastroenterology at Hospital Universitari Vall d’Hebron in Barcelona
- 2010: “Understanding Gut Microbiota: A New Era in Gastroenterology,” with Dr. Erwin G. Zoetendal from Wageningen, Netherlands
- 2012: “Intestinal Permeability: Does it Explain the Symptoms of Functional GI Disorders?” with Giovanni Barbara, MD from the University of Bologna; “Regulation of Intestinal Permeability in Health and Disease” with Alessio Fassano, MD from the University of Maryland and “Esophageal Permeability: Does it Explain the Symptoms of NERD?” with Roy Orlando, MD from the University of North Carolina at Chapel Hill
- 2013: “The Role of Food Sensitivities and Microbiota in Functional GI Disorders” with Sheila Crowe, MD from the University of California in San Diego, CA; “Food sensitivities and food allergies: The clinical perspective” and Kevin Whelan, PhD from King’s College, London; “Understanding the mechanisms underlying the interaction of food and gut microbiota in FGIDs”
- 2014: “Understanding and Treating the Brain’s Contribution to Pain”: “Central mechanisms of pain” with Irene Tracey, PhD; Oxford Centre for Neuroethics; “Behavioral interventions for pain management” with Laurie Keefer, PhD; Northwestern University; “Centrally targeted pharmacotherapy for chronic abdominal pain” with Douglas A. Drossman, MD; Center for Biopsychosocial Patient Care and UNC
- 2015: “Clinical Practice and Research for FGIDs in the Technology Era”. “Clinical practice in a social media environment” with Ryan Madnick MD; University of North Carolina; “Use of health information technology in clinical practice” with William D. Chey MD; University of Michigan; “How health information technology on the internet can be used in clinical research” with Patrick Furey; ConsumerSphere

Rome Webcasts from DDW and UEG Week

In 2011, the Rome Foundation began a new educational initiative to highlight the most important abstracts on Functional GI and Motility Disorders presented at DDW. The DDW 2011 - 2015 webcasts are available online at: http://theromefoundation.org/rome-update-at-ddw-2015/.

In 2015, the Rome Foundation continued this program. A committee of Rome Foundation Board Members reviewed and prioritized the highest quality posters and oral presentations at the DDW meeting in Washington DC in May 2015. Using this information, the Rome Foundation in association with the GI Health Foundation produced a CME webcast: “The Rome Update from DDW”. Drs. Lin Chang and Doug Drossman reported on the important abstracts using a news media format. The webcast is available on the Rome Foundation website.

NEW in 2015 we added “The Rome Update from UEG Week”. Using the same process and format that the Rome Foundation has used in previous years with the DDW Abstract review, we created a similar CME program from UEG Week in Barcelona, Spain in October 2015. See www.focusmeded.com/special_event/rome/2015/ to view the update from UEG Week.
Education Program

Education Committee
The Rome Education Committee, chaired by Lin Chang, MD, was formed by the Rome Foundation Board at the December 2007 strategic planning meeting to educate physicians and other health care providers about functional GI disorders (FGIDs) through a variety of approaches. Since that time, we have developed a host of educational tools which reflect the latest research, engineered to guide health care providers with the most current and practical tools in the field of FGID. Some of the programs under the Education Program have included the Rome Foundation - AGA Institute Lectureship at DDW, the Rome Foundation - AGA Institute Communication Skills Workshop, and various symposia and workshops. We have recently focused and updated our educational programs based on Rome IV.

Clinical Algorithms Project
In April 2010, the Rome Foundation introduced our clinical algorithms, a new clinical tool to help clinicians in the diagnosis of common gastrointestinal symptoms. The algorithms were published in the American Journal of Gastroenterology and are available on our website and through the journal. The algorithms have also been translated into Spanish, Chinese, and Portuguese. The original 15 case-based algorithms were revised and updated for Rome IV and now we have 19 algorithms for adults, and 10 for pediatrics. The algorithms cover symptom presentations of the primary GI regions in adults (esophagus, gastroduodenal, biliary, bowel, anorectal and centrally mediated abdominal pain), as well as, the symptom presentations in neonates-toddlers and children-adolescents. Each chapter has an introductory discussion section to help the reader understand the nature and underlying pathophysiology of the symptoms relative to that region or age group and then move on to discuss anywhere from two to fourteen algorithms.

Primary Care Book
Our first book for primary care physicians was titled, “Understanding the Irritable Gut: The Functional Gastrointestinal Disorders” by former board member W. Grant Thompson, MD and edited by Douglas A. Drossman, MD,. Since then, the Rome Foundation Primary Care Committee was formed and published two articles and a book on the management of functional GI disorders by primary care physicians and other non-GI providers. This book covers the spectrum of these disorders and focuses on how to make a diagnosis and provide treatment , combining scientific evidence with a practical approach and clinical experience.

Multi-Dimensional Clinical Profile
The MDCP is a unique learning tool which redefines the way clinicians can care for their patients who have even the most complex functional GI disorders. The Rome Foundation had over 30 original MDCP cases published in our 1st edition book. We have now updated these cases and added additional ones based on the Rome IV diagnoses in our 2nd Edition book. These MDCPs, which covers the full spectrum of functional GI disorders from mild to severe, are meant to be clinically valuable to students, practitioners in gastroenterology and primary care, health care extenders, or anyone who treats patients with FGIDs. After completion of these case exercises, the reader will be well prepared to address the full spectrum of treatment options available to help our patients. The Rome Foundation gathered the world’s leading experts to create an intuitive learning model that incorporates how good clinicians approach treatment of these disorders. The key factors are organized into a simple and logical 5-component framework. Using this information, we provide a treatment plan uniquely targeted to the patient.

Rome Computer-Based Learning Program Slide Set
The Rome Foundation has developed over 800 images and slides for Rome IV and additionally a Rome IV a Multi-Dimensional Clinical Profile (MDCP ) slide set. The slides includes notes and references covering the information provided in the Rome IV book. Designed by the world’s leading experts in functional GI disorders, the program allows for self-learning and presentations using the most up-to-date information. Purchase the entire slide set collection, specific modules by topic, or individual slides. They are available exclusively from the Rome Foundation website.

Lecture Programs
The Rome Foundation sponsors a variety of lectures and professional meetings. We have an annual Rome-AGA Institute lectureship at DDW as well as Rome Symposia at Conferences around the world. In addition, we launched our International Visiting Professorship and Lectureship Program in 2015. This unique program allows key experts to disseminate the new knowledge of FGIDs at a global level. Currently, our Rome symposia are focused on the new Rome IV information as part of our Rome IV launch.

Website Updates
Our website is being rebuilt and updated to provide more educational information to the public and health care professionals by DDW. Visitors can view our news and updates, order our educational products, download the Rome IV criteria, download the Rome III and IV Questionnaires and electronic scoring in SAS, learn about our research grant program and educational programs, view videos of the communication skills workshop, and learn about meetings and events. Visitors may also join our mailing list or become an Associate to receive periodic updates on Rome Foundation activities and our quarterly e-newsletters.
ROME FOUNDATION INTERNATIONAL PROGRAM FOR VISITING PROFESSORSHIP AND LECTURESHIPS

The Rome Foundation’s visiting professorship (usually 2-3 days) and lectureship (1-2 days) program was created to improve knowledge on functional GI disorders. Speakers are internationally recognized in their areas of expertise, and selection is based on matching selected topics with the speakers. Where there is interest in hearing the latest on functional GI and motility disorders, we invite all medical centers, academic programs, community hospital programs and “gut clubs” to apply.

ADDRESSING CRITICAL NEEDS IN FUNCTIONAL GI AND MOTILITY DISORDERS (FGIDs)

- Over the last 10-15 years, the FGIDs have become a major research area within gastroenterology due to technological advances and growing knowledge related to mucosal immune dysfunction, bacterial flora, brain-gut interactions and newer treatments.
- The FGIDs are the most common GI disorders seen by gastroenterologists and primary care physicians, yet medical school curricula and post graduate training are unable to keep up with advancing knowledge in their diagnosis and treatment.
- Educators possessing the knowledge needed to teach the research and clinical care are limited to a small number of clinical experts who are concentrated at major medical centers.
- The numbers of visiting professorships are diminishing due to increasingly rigorous guidelines that limit industry from supporting such activities. As a result current educational programs may be restricted to local or regional speakers who may not be as up to date on newer content areas.

RATIONALE

- As an academic organization that develops educational materials (e.g., Rome III book, slide sets, research questionnaires, video training, workshops) for the FGIDs, the Rome Foundation is in an ideal position to take responsibility for programs to teach clinicians and trainees.
- The members of the Rome Foundation are selected for their expert knowledge and are the key opinion leaders in research and clinical care of the FGIDs.
- Because the Rome Foundation members develop the research agenda and the clinical guidelines for these disorders, they are highly capable of developing a curriculum for learners that includes the most up to date knowledge as well as current and soon to be developed recommendations for patient care.
- As an international non-profit academic organization with high credibility in the field, Rome Foundation sponsored visiting professorships fill the gap in knowledge of functional GI disorders in the academic and practice community.
- The proposed multi-sponsored programs are not subject to the restrictions on content imposed upon promotional talks. As such, these programs provide a true state of the art update by the world’s leading experts on FGIDs.
- Due to its international structure, the Rome Foundation provides visiting professorships and other educational programs on a global level.
WE HAVE DEVELOPED A SERIES OF VISITING PROFESSORSHIPS AND LECTURES FOLLOWING TWO MODELS:

THE ROMA FOUNDATION VISITING PROFESSORSHIP
Top tier investigators and clinicians within the Foundation visit an academic medical center for a period of 1-3 days to provide a variety of activities: a) medical and/or gastroenterology grand rounds, b) clinical case conferences with trainees, c) individual advisory meetings with young aspiring faculty and trainees seeking to develop a career in the FGIDs, d) workshops or other more intense training programs in their area of expertise if requested. The Foundation advertises and then solicits applications from medical centers. We then identify the best speaker who meets that institution’s specific educational needs.

THE ROMA FOUNDATION VISITING LECTURESHIP
This is usually a 1-day visit either to an academic program or large clinical practice program, gut club or community oriented educational venue. The speaker might give a grand rounds to an academic program, a round table or a lecture to a community educational venue or gut club. It may be possible to link presentations (e.g., a GI grand rounds in daytime and community gut club in evening) over a 24 hour period.

PAST PROGRAMS
In 2015, a total of 10 Visiting Lectureships and 4 Visiting Professorships were organized generating more than 30 presentations across 5 different continents. For 2016, several programs are already planned. With the recognition of the program and the high interest in the Rome IV criteria, the number of activities is expected to be substantially higher than 2015.
Rome Foundation - Asian Neurogastroenterology and Motility Association Working Team

The Rome - Asian working team was established in 2010 as a partnership between the Asian Neurogastroenterology and Motility Association (ANMA) and the Rome Foundation with the goals of developing culturally sensitive translations of the Rome III Diagnostic Questionnaire and carrying out a multinational survey of functional gastrointestinal disorders in Asia. The co-chairs of the working team were Kok-Ann Gwee (Singapore) and William Whitehead (U.S.A.), and the secretary was Andrew Chua (Malaysia). Other members of the team were Chen Min-hu (China), Hou Xiao-xia (China), Hiroto Miwa (Japan), Uday Ghoshal (India), Sutep Gonlachanvit (Thailand), and Bak Young-tae (Korea). The goals of the survey were to examine the appropriateness of the Rome III criteria for Asian patients and to broaden the understanding of FGIDs and strengthen their diagnosis and treatment in Asia.

Specific Aims:
1. Design a transnational survey for China, Taiwan, India, Japan, South Korea, Thailand, Malaysia, Singapore, Philippines, and Indonesia.
2. Develop and validate translations of survey instruments in target languages with guidance from Dr. Ami Sperber of the Rome Foundation.
3. Carry out a survey of patients with any FGID diagnoses presenting to primary and secondary care centers across multiple sites in Asia.
4. Understand the symptom presentation and diagnostic challenges, with a view to presenting recommendations appropriate to Asia.

Current Status:
The survey was completed in October 2013. A total of 1805 patients were recruited. The following two papers resulting from this study have been published.


Additional papers describing the survey findings are in preparation.

Cross-Cultural Multinational Research

The working team on Cross-cultural, Multinational Research in the Functional Gastrointestinal Disorders has completed its work. The final report of the working team is available as a downloadable pdf file at www.theromefoundation.org/working-teams-and-committees/multinational-committee/.

The final report relates to:
Methodological issues in multinational research:
- Study design
- Potential research areas
- Availability and development of appropriate study instruments
- Translation and validation of study instruments
- Subject recruitment
- Culturally appropriate endpoints and outcomes

Fostering of multinational research
- Development of research networks
- Formulation of multinational research guidelines for FGIDs
- Collaboration with pharmaceutical companies and regulatory Agencies

In addition the working team has published two papers and a third one is now in submission. The two published papers are:


The third paper, currently in submission, is a systematic review of IBS prevalence around the world.
Food and Diet Committee

ROME FOUNDATION WORKING TEAM ON THE ROLE OF FOOD IN FUNCTIONAL GI DISORDERS

**Background:**
A number of factors have been suggested to play a role in the pathogenesis of IBS including disturbed motility, the brain-gut axis, genetic factors, impaired gut barrier function, immunologic dysregulation, the gut microbiome, and psychosocial factors. More recently, there has been increasing attention on the role of food in IBS. Patients have long associated their IBS symptoms with the ingestion of certain foods, combinations of foods, or a meal itself. In fact, more than 60% of IBS patients report worsening of symptoms after meals; 28% of these within 15 minutes after eating and 93% within 3 hours. Unfortunately, the relative lack of empiric data proving a causal link or consistently documenting symptom improvement has caused health care providers to view dietary interventions with skepticism. Further, gastroenterologists and primary care providers receive virtually no structured training in dietary interventions for IBS. This lack of enthusiasm for dietary counseling has increasingly caused providers to be misaligned with their patients who commonly ask for more holistic solutions for their IBS symptoms. Out of desperation, many providers recommend or passively stand by as their patients empirically attempt various dietary manipulations, such as the elimination of fatty foods, fruits, gluten, milk/dairy products, or modifying dietary fiber content. This haphazard approach leads to inconsistent results which can be frustrating for both patients and providers.

It is now clear that a number of disorders and diseases can masquerade as or exacerbate the symptoms of IBS. For example, few clinicians would dispute that celiac disease and lactose intolerance are important considerations in patients presenting with IBS symptoms. However, these two well-defined disorders likely represent the tip of the iceberg as it pertains to the role of food in IBS. For these reasons, the Rome Foundation has decided to formulate a multidisciplinary group to carefully evaluate the evidence which supports a role of food in the pathogenesis and management of FGIDs.

**Key Questions to be addressed:**
Members of the working group will be charged with addressing a number of key questions as outlined below. Whenever possible, the working group will try to conduct a systematic review of the literature to identify the best possible evidence to answer each of the key questions. The same set of questions will be applied to the most prevalent FGIDs including GERD/heartburn, functional dyspepsia, irritable bowel syndrome, bloating, diarrhea and constipation.

1. **Physiology of food’s effects in the GI tract:**
   - How does the GI tract handle food?
   - How does the GI tract sense nutrients?
   - Consequences of nutrient sensing on perception?

2. **Pathophysiology:**
   - Is nutrient handling different in FGIDs?

3. **Food intake and symptoms in FGID:**
   a. Does food intake exacerbate symptoms in FGID and if so, by what mechanism/s?
   b. Is food intake altered in patients with FGID?
   c. Can food challenges be used to measure symptom patterns and severity in FGIDs?
      - Reflux provocative meals in GERD
      - Nutrient challenge tests in FD
      - Meal-related symptom measurements in FD and gastroparesis
      - Meal-related exacerbations in IBS and bloating
   d. Can changes in food intake be used to improve symptoms in FGIDs and if so, by what mechanism/s?
   e. Can specific nutritional interventions (“functional foods”) be used to improve symptoms in FGIDs and if so, by what mechanisms?

**Result:**
The Committee has generated a series of articles on the role of food in FGIDs which were published in the American Journal of Gastroenterology in May 2013. The Role of Food in the Functional Gastrointestinal Disorders: Introduction to a Manuscript Series. Am J Gastroenterol 2013; 108:694–697; doi:10.1038/ajg.2013.62;

**Committee Composition**

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<tr>
<th>Name</th>
<th>Institution</th>
<th>Country</th>
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<tr>
<td>William D. Chey, MD</td>
<td>Michigan, USA</td>
<td>Co-Chair</td>
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<td>Jan Tack, MD, PhD</td>
<td>Leuven, Belgium</td>
<td>Co-Chair</td>
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<td>Fernando Azpiroz, MD, PhD</td>
<td>Barcelona, Spain</td>
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<td>Sheila Crowe, MD, USA</td>
<td>California, USA</td>
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<td>Shanti Eswaran, MD, USA</td>
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<td>Peter Gibson, MD, Australia</td>
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The Role of the Intestinal Microbiota in FGIDs

The pathogenesis and pathophysiology of patients with functional gastrointestinal disorders remains incompletely understood. During the last years, the role of intestinal microbiota in the development of functional gut problems has received great interest, with a steadily increasing numbers of research projects assessing this. For instance, it has been convincingly demonstrated that one of the most well established risk factors for developing IBS is having a bacterial or viral gastroenteritis. However, why some, but definitely not all, subjects with a gastroenteritis go on to develop longstanding symptoms, whereas others regain their gut health within a week, is not altogether clear. Moreover, there are also suggestions that patients with IBS have abnormal composition of the colonic bacterial flora, as well as controversial findings that small intestinal bacterial overgrowth is a major factor in IBS. New treatment options for functional GI disorders based on these findings have also appeared, such as non-absorbable antibiotics, and prebiotics, probiotics and synbiotics. Even though these findings are very intriguing and of great interest for researchers in the field, their relevance of some of these is unclear. Especially, their potential implications for the daily care of our patients are not well established.

The specific goals of the Working team were:
- To critically review the existing literature on the role of gut microbiota in functional GI disorders (FGIDs), with focus on clinical and translational aspects. This included the relevance of post-infectious IBS, alterations in composition of small and large intestinal microflora in FGIDs, the clinical usefulness of antibiotics and probiotics in FGIDs, as well as a thorough review on the basic/translational science literature with potential clinical relevance for this group of patients. A specific focus was on new methodology to assess the relevance of gut microbiota in FGIDs and potential drawbacks and pitfalls with previously used methods.
- Based on the literature search, provide recommendations how to implement the current knowledge into clinical practice, in order to improve the health of our patients.
- To give recommendations for future work in order to improve the current knowledge on the role of gut microbiota in functional GI disorders.

The report summarizing the work of the group was published in *Gut* in January 2013.


Committee Composition

**Chair**
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**Co-Chair**
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Bologna, Italy

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**Translational:**
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**Basic/Microbiology:**
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Harry Flint, PhD
Aberdeen, UK
Severity in IBS

Measuring severity in functional GI disorders (FGIDs) is necessary to guide diagnostic evaluation, risk assessment, and treatment decisions. However, there has been a dearth of consensus regarding severity in irritable bowel syndrome (IBS) and other FGIDs. In late 2005, the Rome Foundation assembled a working group to develop guidelines for severity assessment in FGID. This committee was comprised of members with different areas of expertise but with a mutual interest in severity and in establishing clear health outcomes assessment. In 2011 the committee members published a document that summarized the literature on the concept of severity in IBS, its methods of assessment as well as guidelines for future work in this area.


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Guidelines for Brain Imaging in the FGIDs

A working team on brain imaging in the functional GI disorders was organized after the completion of the Rome III. This committee, led by Emeran Mayer (Chair) and Qasim Aziz (Co-Chair), began their work in July 2005 developing documents on brain imaging in the functional GI disorders. Additional committee members selected for the project were Doug Bremner (Emory University), Mark Kern (Medical College of Wisconsin), Braden Kuo (Harvard), Richard Lane (University of Arizona), Bruce Naliboff (UCLA), and Irene Tracey (University of Oxford).

The charge to this committee was to review available literature on standards for brain imaging assessment in medicine and establish recommendations for the conduct of brain imaging studies in the functional GI disorders.

The committee developed an outline, assigned topics to committee members, and worked through email to develop drafts of the brain imaging document. The members then convened a meeting just before attending the 12th Annual Meeting of the Organization for Human Brain Mapping in Florence, Italy and again in Cambridge in September 2006, to review and revise the documents to resolve any gaps or conflicts.

Since that time the committee has worked diligently to ensure that this keystone document for brain imaging in FGIDs was further updated by new research in the literature. In addition, members of the UCLA Center for Neurobiology & Stress assisted in further updating the report with new literature and responded to peer reviews for publication.


We are pleased to announce that an update will be produced by a new working team committee chaired by Emeran Mayer and co-chaired by Dr. Qazim Aziz. The new working team report will focus more on clinical application and translational aspects of brain imaging in the FGIDs. Publication was in 2015.

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Outcomes/Endpoints in Pharmaceutical Clinical Trials

Because of the complexity of the functional gastrointestinal disorders, it has been difficult over the years to determine which outcome measures and endpoints should be used in clinical trials of pharmaceutical agents. Some trials have used a global relief measure as a primary endpoint, while others have focused on symptom improvement.

The Rome Foundation has approved initiative for a strategic group to explore the behavior of different outcome measures and endpoints that have been used in large clinical trials for irritable bowel syndrome. This effort is consistent with the Rome III Design of Treatment Trials documents that recommend additional research to address outcomes and endpoints in the functional gastrointestinal disorders.

**Brief Summary of Plan**

**Aims**

To conduct a systematic review and meta-analysis of the psychometric and performance characteristics of primary endpoints used in large multicenter therapeutic trials for irritable bowel syndrome using pharmacological approaches, specifically:

1. global assessment of relief
2. adequate or satisfactory relief of IBS pain or discomfort
3. integrative symptom severity scores

The results of this study were published in Gastroenterology, December 2009.


**Committee Composition**

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Rome IV Educational Books

THE ROME IV EDUCATIONAL MATERIALS INCLUDE SEVERAL BOOKS, EACH SERVING DIFFERENT PURPOSES. THEY ARE AVAILABLE AS HARD COPY BOOKS AND E-BOOKS:


As with earlier book editions beginning in 1994, the Rome IV textbook is a comprehensive update of knowledge in FGIDs and in the Rome IV diagnostic criteria. It is a 1,500-page, two-volume book created by 117 internationally recognized clinicians and investigators in the field.

Volume I contains a comprehensive set of background chapters on neurogastroenterology (basic science and physiology); pharmacology, pharmacokinetics and pharmacogenomics; age, gender, women’s health and the patient’s perspective; cross-cultural aspects of FGIDs; the role of the microenvironment (food and microbiota); and biopsychosocial aspects of assessment and management.

Volume II provides the key clinical information on 33 adult and 17 pediatric FGIDs from esophagus to anorectum, as well as a newly developed chapter on centrally mediated disorders of gastrointestinal pain. For each FGID we provide recent information on the epidemiology, pathophysiology, and psychosocial aspects along with evidence- and consensus-based recommendations on diagnosis and treatment. Volume II also contains new information and the revised Rome IV diagnostic criteria for adult and pediatric FGIDs. Also there are appendices that contain key reference information including the Rome IV diagnostic criteria tables, a comparison of the Rome III and Rome IV criteria, a flowchart to assist in the biopsychosocial assessment of patients with FGIDs and how to treat or when to seek a mental health consultant. There are also the validated Rome IV pediatric and adult questionnaires criteria for epidemiological and clinical research.
Rome IV Multidimensional Clinical Profile for Functional Gastrointestinal Disorders: MDCP (Second Edition)

The MDCP redefines the ways in which clinicians can care for patients having even the most complex functional GI disorders. The 2nd edition is a case-based learning module that updates the content of the first MDCP book published in 2015. There are over 70 cases, more than double that in the first edition, and all cases are revised to meet the Rome IV diagnostic standards.

The book helps the clinician understand the complexity and dimensionality of these disorders. Discerning clinicians recognize that just making a diagnosis is not sufficient to determine treatment. For example, a patient with IBS-D having mild and occasional symptoms of abdominal discomfort and loose stools and functioning without impairment would be treated quite differently than a patient with the same diagnosis having continuous severe and disabling pain and comorbid anxiety disorder with fears of incontinence when leaving the house.

Furthermore, we have added 18 pediatric cases (neonate-toddler and child-adolescent) and 4 cases where sociocultural influences affect symptom presentation, and where treatment must be geared to the patient’s cultural perspective. In this way, any diagnosis, for example, IBS or dyspepsia, has multiple clinical cases ranging from mild to severe, with or without associated comorbidities or sociocultural influences or with psychological comorbidities.

As before, the MDCP identifies and classifies five components of every case scenario that include the categorical Rome diagnosis (Category A), additional subclassifications leading to more specific treatments (Category B, e.g., IBS-D or IBS-C, EPS or PDS), the personal impact of the disorder on the patient (Category C), psychosocial influences (Category D), and physiological abnormalities or biomarkers (Category E). This framework is intuitively clear and the organizational approach is both pragmatic and useful.

The 1st edition of the book was translated into Spanish, and the MDCP concept has been promoted by academic organizations including at the AGA’s Annual Freston conference (article in AGA Institute’s GI & Hepatology News) and at two webinars sponsored by the ACG (ACG-sponsored webinars).

Rome IV Diagnostic Algorithms for Common GI Symptoms (Second Edition)

The diagnostic criteria, designed primarily for research, has a limited role in clinical practice. Patients don’t go to doctors complaining of IBS, or sphincter of Oddi dysfunction; they present with symptoms of abdominal pain, nausea, vomiting and constipation, among others. Accordingly, the Foundation initiated a multiyear committee process to address this concern by incorporating diagnostic decision making, information about testing and the use of the symptom-based criteria into a series of clinical algorithms.

This 2nd edition, with guest editor John Kellow, MD, was developed concurrent with that of the Rome IV book. Thus we called upon the Rome IV chapter committee members to accomplish this update and revision with the creation of new algorithms, all consistent with Rome IV diagnostic guidelines and criteria. Now there are 19 algorithms for adults, and 10 for neonates, toddlers, children and adolescents. The book is organized into 8 separate chapters that cover the symptom presentations of the primary GI regions in adults (esophagus, gastroduodenal, biliary, bowel, anorectal and centrally mediated abdominal pain) as well as the symptom presentations in neonates-toddlers and children-adolescents.

Each chapter has an introductory discussion section to help the reader understand the nature and underlying pathophysiology of the symptoms relative to that region or age group and then move on to discuss for each chapter anywhere from two to fourteen algorithms. Then for each algorithm we include features that bring the information to clinical reality: a) a case report linked to the algorithm in order to demonstrate real-life application, b) a color-coded algorithm graphic using standard “yes-no” decision tree methodology for branched decision making, c) links for each box to information that explains in detail the reasons for the clinical decision or the diagnostic assessment method and d) up-to-date references to support the clinical information. Thus, each common GI symptom yields a clinically meaningful diagnostic algorithm image and incorporates diagnostic testing recommendations, ending with specific diagnoses. When other structural disorders are excluded, the path leads to the Rome diagnostic criteria and ultimately the diagnosis of the FGID.

Finally, there is an appendix that includes the Rome IV Diagnostic Criteria for reference and also the Rome IV Psychosocial Alarm Questionnaire to help providers decide when in the evaluation is referral to a mental health consultant recommended.
As noted, one of the Rome IV initiatives was that of reaching a larger audience of non-gastroenterologists. We have partnered with leaders in the primary care field to create a primary care book, co-edited by Joel Heidelbaugh, MD, and Pali Hungin, MD.

For many years, the Rome Foundation has heard from primary care physicians that our educational materials are “too complex, cumbersome, and not efficient” for practical day-to-day use. Taking this as a challenge, in 2010 the Board of Directors prioritized the effort to find ways to learn more about how primary care physicians understand and approach diagnosis and treatment of FGIDs. We approached Pali Hungin, MD, a leading expert in the primary care of FGIDs, to help us develop a mechanism for the Foundation to offer relevant educational materials for primary care. This led to formation of the Rome Foundation Primary Care Committee, which published two articles on how non-gastroenterologists see FGIDs, and this eventually culminated in the Rome IV primary care book. This efficiently organized book is designed to help the busy primary care physicians and other non-gastroenterological providers who see patients with these disorders.

The book is organized into 12 chapters that cover the spectrum of FGIDs, but in a fashion that is specifically designed to address the diagnoses most commonly seen, with emphasis on “how to” diagnosis and treatment information. Chapters first address the burden of FGIDs on the patient and their relation to other functional somatic syndromes. Following this is general information relating to diagnostic and management strategies for primary care, patient-centered approaches to care, and then an understanding of these disorders from a biopsychosocial perspective.

The second part addresses the most important FGIDs: esophageal, gastroduodenal (functional dyspepsia), bowel (e.g., IBS and constipation), anorectal (e.g., dyssynergic defecation and incontinence), childhood disorders for neonates-toddlers and children-adolescents, centrally mediated disorders of GI pain (e.g., chronic pain and narcotic bowel syndrome) and finally multicultural aspects of FGIDs.

The book concludes with the comprehensive list of the Rome IV FGIDs and their diagnostic criteria.

The Rome Foundation maintains a major commitment to the creation and dissemination of good research in the field of FGIDs. To properly study patients having these disorders we need to identify them in as precise a way as possible. Hence, we have proposed, created and disseminated the use of diagnostic criteria and questionnaires for epidemiological and clinical research. As such the Rome criteria have been recommended by the U.S. FDA, the EMA and other regulatory agencies for clinical trials, and they remain the only method used to diagnose patients by epidemiological surveys.

To maintain this initiative for Rome IV, we developed an extensive multinational program to first create the Rome criteria through our Rome IV chapter committees, and, in addition, validate and also translate the questionnaires containing these criteria research. We have done this not only for adults but also adolescents and young children.

This book, guest edited by William Whitehead, PhD, provides, in one compact volume, all that is needed for researchers and clinicians to perform studies in English-speaking countries. The book begins with an introduction by Dr. Whitehead, follows with chapters about FGIDs and the Rome IV process, and then contains a chapter on the development and validation of the Rome IV questionnaires.

The second section is the heart of the book: 1) the diagnostic questionnaires for adult functional GI disorders, 2) the psychosocial alarm questions for FGIDs to help clinicians decide when to refer patients for mental health treatment, and 3) the diagnostic questionnaires for pediatric FGIDs with questionnaire sets for children and adolescents as well as neonates and toddlers.

Finally the appendices provide supplemental information including a reference table of all the Rome IV diagnostic criteria, a comparison table between Rome III and Rome IV criteria for investigators who may have used Rome III in previous studies, and finally a psychosocial assessment flowchart created by the Biopsychosocial committee to guide clinicians in the biopsychosocial care of their patients.
Rome IV Pediatric Functional Gastrointestinal Disorders – Disorders of Gut-Brain Interaction
(First Edition)

The field of pediatric FGIDs has grown over the last two decades, and for this reason we have decided to publish a separate book on pediatric FGIDs, which is extracted from the main Rome IV chapter material.

This book has an introduction by co–guest editors Samuel Nurko, MD (chair of the Neonate-Toddler Committee) and Carlo Di Lorenzo, MD (chair of the Child-Adolescent Committee).

Following this are the two updated and expanded pediatric chapters of Rome IV and also newly validated sets of the pediatric diagnostic questionnaires and criteria, a series of pediatric Multidimensional Clinical Profile (MDCP) cases for the Rome IV book, and a set of diagnostic algorithms for both neonate-toddler and child-adolescent. Thus, the pediatric gastroenterologist can possess a complete but compact book on FGIDs relative to his or her specialty.

Rome IV Online Subscriptions

A major enhancement to our educational program will be to provide all books online on a subscription basis, allowing the individual to do free-text searching across all book platforms. For example, searching “functional dyspepsia” will lead to links in the Rome IV books, algorithms, MDCP, pediatrics and primary care. We believe that this will be a very popular option for clinicians and investigators as it will always be accessible through a password and can be purchased with several options.

### Subscription Prices:
- One month: $27
- Six months: $157
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- Lifetime (life of book ~ 10 years): $597

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Rome – LogicNets Collaboration

Captures expert knowledge from Rome to create a novel interactive learning tool
- Rome IV diagnostic algorithms and MDCP provides the basis for expert decisions, yet it is complex and requires multi-dimensional representation
- LogicNets is a visual modeling and decision support engine that optimizes the Rome content to produce an online interactive format to accomplish this

On-line delivery system. Clinicians interact directly with decision pathways
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- Rome IV Volumes I and II
- Rome IV Multidimensional Clinical Profile for Functional Gastrointestinal Disorders (MDCP Second Edition)
- Rome IV Diagnostic Questionnaires and Tables for Investigators and Clinicians (First Edition)
- Rome IV Diagnostic Algorithms for Common GI Symptoms (Second Edition)
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American College of Gastroenterology
October 14 - 19, 2016
Las Vegas, Nevada
[www.Acgmeetings.gi.org](http://www.Acgmeetings.gi.org)

**PUMCH**
November 5, 2016
China

**AMG 2016**
Mexican Congress of Gastroenterology
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Mexico
[www.gastro.org.mx](http://www.gastro.org.mx)

**UEG Week**
October 15 - 19, 2016
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[www.ueg.eu/week](http://www.ueg.eu/week)

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December 9-11, 2016
Boston, MA, USA
[www.pri-med.com](http://www.pri-med.com)
The Rome Foundation seeks to collaborate with and support membership organizations that share similar goals:

- Promote global recognition and legitimization of FGIDs
- Advance the scientific understanding of their pathophysiology
- Optimize clinical management for these patients
- Develop and provide educational resources to accomplish these goals

The Rome Foundation continues to establish collaborative efforts with academic and public organizations as well as regulatory agencies that share similar goals to advance the field of functional GI and motility disorders and to help those patients so afflicted. Our current and developing associations are with the IFFGD, AGA Institute, ANMS, FDA, EMA, ACG, GI Health Foundation and Focus Med-Ed.

**Rome IV and Rome Foundation Sponsors**

*The Rome Foundation is grateful to our industry sponsors who continue to financially support our mission to advance and promote the field of functional gastrointestinal disorders through research and educational initiatives.*

Benefits of Rome Foundation Sponsorship include the following:

- Participation in annual advisory meetings of the Rome Foundation Advisory Council
- Opportunity to make presentations at Rome Foundation Advisory Council meetings
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MISSION - TO IMPROVE THE LIVES OF PEOPLE WITH FUNCTIONAL GI DISORDERS