

Foreword Christian Maaser Giovanni Maconi





Dear colleagues,

In 2015 few colleagues from Italy, Germany and Canada came together given their passion and belief in the use of intestinal ultrasound (IUS) as an important novel tool for evaluating patients with IBD, to establish the International Bowel Ultrasound Group (IBUS). The vision of this group of experts was to provide an international training curriculum for IBD physicians interested in learning this important method for daily practice. We hope to grow and expand the use of IUS internationally, in addition to fostering research and expanding scientific support for utility of IUS. The original group of 8 members from 3 countries has now grown to include memberships from across the globe, including 230 members from 36 countries. As a non-profit organization, our committed executive and faculty contribute their time and dedication to increasing the availability of IUS across the world. I want to express my gratitude to all my colleagues who have given lectures, provided hands-on training opportunities and who continue to support and mentor trainees from east to west, without honoraria. I also want to heartfully thank our sponsors, without whom we would not be where we are today.

On our website, you may learn more as you will find funding calls, details regarding research projects as well as learning about who in our growing network you may communicate with directly, to support your interests in IUS.

We look forward to seeing you at our next membership meeting in Vienna at ECCO, February 12th, 2020. We and the other IBUS board members would be happy to meet with you in person. We look forward to celebrating IBUS' successes, while looking to the future as we work together to set goals for the next year. We also welcome your participation in our organization, as elections for the IBUS board will occur every three years. An election will occur at our General Assembly in Vienna, and welcome applications from our members. Please send your application to office@bowel-ultrasound.org.

We are very much looking forward to meeting you in person and helping you to become another expert in bowel ultrasonography!

Christian Maaser

Giovanni Maconi

Chair, Prof. Dr. med., MD

Ass. Prof., MD

Table of Contents

Education

Curriculum - an accredited Training Program	04
Webinars	07
Science	
Central Reading	08
IBUS Research Grant 2020	11
Our Clinical Trials	12
Sono Post-OP	14
Recent important Publications	14
Study centers	16
Guideline	18
Association	
Structure of the non-profit association	19
Our Members	20
Office Team	22
IBUS Membership Meeting	23

Education

Curriculum

An Accredited Training Program in IBUS

The foundation of this training program is to teach standardized, high quality technique for an IUS examination. The international bowel ultrasound curriculum was thus established, consisting of three educational components. The IBUS Curriculum is a complete program, developed to be completed consecutively, over at most 2 years.



IBUS Hands-on Workshop

Introduction performing intestinal ultrasound (3 days)



Hands-on training

4 weeks of daily hands-on training in an expert IBUS training center (4 weeks)



ECCO-ESGAR Advanced Workshop

incl. final exam (1 day)

Curriculum starts in:



Introduction of Bowel Ultrasonography

Workshop incl. Theory and Hands-on Practice

The 3 day curriculum covers everything from setting up the ultrasound machine, to normal bowel findings, mural and extramural findings including complications such as fistula and abscess as well as bowel findings other than IBD. Short theoretical introductions are followed by handson sessions with healthy volunteers, IBD patients as well as simulators. Colleagues, treating IBD patients, interested in learning intestinal ultrasound with the aim of introducing the methods in their daily practices following the IBUS curriculum can apply online. Due to the high demand, all applications are reviewed by an expert committee.

Past Workshops

Lueneburg, Nov 2016
Milan, May 2017
Calgary, Apr 2018
Melbourne, Nov 2018
Tel Aviv, May 2019
Copenhagen, Nov 2019

 How to Perform Intestinal Ultrasound?

Module 1

- Intramural and Extramural Findings
- IUS in Pediatrics
- How to Set up the Machine?
- Complications
- IUS in the Post-Surgical Examination
- Perineal US



Ask Lisa Meyer for more information: lm@bowel-ultrasound.org





Hands-on in a certified IBUS center

We are also looking for new centers!

Four weeks Hands-on training – Learn with expert supervision

The IBUS Module 2 is a four-week hands-on training at a certified IBUS center and aims to deepen knowledge and practical abilities in bowel ultrasonography gained in Module 1. The independently performed cases are to be documented in an IBUS-online based logbook for later certification. Our Training Centers

ECCO

ESGAR Advanced IUS Workshop





Organisation: ECCO EduCom in collaboration with ESGAR.

Target audience: Physicians, Radiologists, Surgeons, Paediatricians.

Online Registration: Directly on the ECCO congress homepage, on first-come first-served basis. A prior ECCO membership is mandatory.

CME accreditation: 3 CME Credits; prerequisite: completion of the online evaluation form.

Upcoming

7th ECCO-ESGAR Ultrasound Workshop

Advanced

13 Feb 2020

ECCO Membership 2020 required

Webinars | Extra Module

Four times a year we offer for our IBUS members interactive webinars with case presentations and discussion of new research.

- Get your knowledge refreshed
- Present your own case
- Ask quetions to the experts

It is ongoing!

29 January 2020 30 April 2020 25 June 2020 25 October 2020

Science

Central Reading

Online Platform (CROP)

Limit the investigator variability by uploading your intestinal ultrasonography files to our safe CROP and get a professional review from our team of experts all around the world.



Enhance the quality of your trial

By applying central reading to your trial, you ensure the highest quality and the lowest interater variability.



Team of Certified Central Readers

We constantly improve the quality of our reads by several internal tests to ensure consistant reads among our team of central readers.



Rapid and secure reading all year round

Data is securely stored with backup at our servers and we offer fast reads of your scans, so you can focus on recruitment and study conduction.



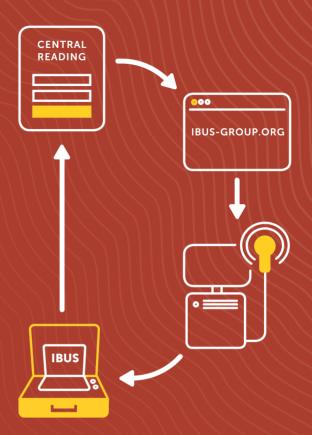
Quality support and guidance

We offer different levels of support and guidance for involved centers to ensure all needs are met.

For further information:

Erik Wohlfarth

ew@bowel-ultrasound.org



How does it work?

- 1. Export your scan in DICOM
- 2. Upload to our secure server
- 3. Central Reading will be documented online in eCRF

IBUS Group Central Reading System is available for clinical trials

IBUS Case

Central reading DICOM recording Suitcase

The IBUS case can be connected to any ultrasound device. The examination carried out by the respective investigator is recorded, converted into the DICOM format and transferred to the respective study database.



The case ensures that:

- The upload of the bowel ultrasound images and video files runs automatically, thus saving the investigator time.
- The data is made available to the central readers as quickly as possible all data records appear in the same format (DICOM).
- All data in the study database have the same quality.

IBUS Research Grant 2020

2020: The International Bowel Ultrasound Group (IBUS) invites all interested members to submit clinical research proposals to be considered for inaugural funding support jointly provided through IBUS and ECCO.

A clinical research fund of **20,000 EUR** will be awarded to the successful investigator. Applicants must be IBUS members at the time of submission. IBUS aims to support clinical excellence in the investigation of utility of intestinal ultrasound used in the assessment of patients with inflammatory bowel disease.

KEY DATES

1 Mar 2020

submissions open please send your protocol to office@bowel-ultrasound.org

3 Jun 2020

application deadline

2 Aug 2020

successful grant funding announcement, notification will be sent to all applicants

Feb 2021

official hand-over of award certificate at ECCO meeting

APPLICATION OVERVIEW

Selection Criteria

Awardees will be selected based on scientific merit, feasibility and importance of the scientific contribution, as reflected in IBUS scientific priorities. Candidates should be established within clinical units with expertise in inflammatory bowel disease, with established expertise in performance of intestinal ultrasound with routine access to an ultrasound machine. The proposal should contain sufficient detail to ensure feasibility and merit.

Requirements

The protocol should be no more than 5 pages in length and include:

- Scientific Aim
- Background/ significance
- Methods/ research plan
- Budget
- References

In addition, a curriculum vitae is required.

Our Clinical Trials

Treatment targets for IBD have evolved beyond clinical symptoms and remission. The recognition of the importance of healing seen on cross-sectional imaging modalities, including ultrasound is growing, predictive of improved outcomes for patients. IUS is cost-effective, well tolerated by patients and thus easily repeatable. This creates a perfect monitoring tool, yet access to this important innovation is limited in many parts of the world. Increasing the scientific evidence foundation to support the use of IUS is imperative to increase uptake.

STARDUST IUS substudy:

Study of Treat to Target Versus Routine Care Maintenance Strategies in Crohn's Disease. Patients Treated with Ustekinumab.



This was the first international, interventional, multicenter study using IUS as an endpoint in CD. The aim of the substudy was to assess changes in IUS parameters, including transmural response to UST induction therapy.

TRUST BEYOND:

Evaluation of the predictive value of ultrasound parameters for therapy response in Crohn's disease and Ulcerative colitis patients.



The primary objective is to assess whether an early (trans)mural response after initiation of TIM therapies in patients with CD and CU has a predictive value for long-term therapeutic response.

OBVIO-US:

Observer agreement of Intestinal ultrasonography in Ulcerative colitis.



The main objective of this study is to evaluate observer agreement of ultrasonography in the complete spectrum of UC disease activity.

Sono POST-OP

Importance of sonography in postoperative monitoring of Crohn's disease

Study design

Prospective, multicenter, non-interventional, single-arm study

Study Hypothesis

The combination of non-invasive diagnostics with calprotectin and IUS is not inferior to endoscopy in the detection of postoperative endoscopic relapse

Primary endpoint

Sensitivity and specificity of the combination of sonography and calprotectin to predict endoscopic postoperative relapse at month 6 (Rutgeerts Score (RS) I3-4)

Secondary endpoints

- **Negative predictive value** of non-invasive diagnostics for postoperative endoscopic remission (RS: 10-2) at month 6
- Positive predictive value of:
- non-invasive diagnostics (month 1 and month 3) for RS: 13-4 at month 6 and at month 18-24
- non-invasive diagnostics for a postoperative clinical relapse (HBI > 8) until month 18-24
- RS: I0-2 at month 6 for the endoscopic remission at month 18-24
- RS: I0-2 at month 6 for clinical remission (HBI \leq 4) at month 18-24
- Frequency of postoperative endoscopic or clinical relapses up to month 18-24
- Sonographic **detection of postoperative complications** (stenosis, abscess, fistula) up to month 18-24

Numbers of centers and patients

10 international IBUS centers, approx. 100 patients

Inclusion criteria

Adult patients with Crohn's disease and with ileocolostomy with complete resection of the inflamed intestine (no further affection of the GI tract)

(independent of the number of previous operations, or risk factors for

(independent of the number of previous operations, or risk factors for postoperative relapse, or of postoperative therapy)

Exclusion criteria

• Protective stoma

• Tumor disorder

Visits

Months: 1, 3, 6, 12, 18, 24

Study duration

Patient inclusion: 12 months
Duration: 24 months

Publications

Recent important publications (last 5 years)

- 1. Maaser C, (...) Kucharzik T; German IBD Study Group and the TRUST&UC study group. Intestinal ultrasound for monitoring therapeutic response in patients with ulcerative colitis: results from the TRUST&UC study. Gut. 2019 Dec 20. pii: gutjnl-2019-319451. doi: 10.1136/gutjnl-2019-319451.
- Novak K, Maaser C, Wilkens R, Maconi G, Kucharzik T; International Bowel Ultrasound Group. Diagnostic accuracy of MRE and ultrasound for Crohn's disease. Lancet Gastroenterol Hepatol. 2019 Feb;4(2):95-96. doi: 10.1016/S2468-1253(18)30388-1. PubMed PMID: 30647016.
- Kucharzik T, (...), Maaser C; TRUST study group. Use of Intestinal Ultrasound to Monitor Crohn's Disease Activity. Clin Gastroenterol Hepatol. 2017 Apr;15(4):535-542.e2. doi: 10.1016/j.cqh.2016.10.040. Epub 2016 Nov 14. PubMed PMID: 27856365.
- **4.** 4. Ungar B, (...), **Carter D**. Association between adalimumab trough levels and bowel sonography in Crohn's patients. \united European Gastroenterology Journal. Accepted for publication.
- Nylund K, (...), Gilja OH. Interobserver Analysis of CEUS-Derived Perfusion in Fibrotic and Inflammatory Crohn's Disease. Ultraschall Med. 2019 Feb;40(1):76-84. doi: 10.1055/s-0044-100492. Epub 2018 Mar 14. PubMed PMID: 29539644.
- Kucharzik T, Maaser C, Maconi G. Do We Need Activity Scores or Simply Clear Criteria for Intestinal Ultrasound in Ulcerative Colitis? J Crohns Colitis. 2018 Nov 28;12(12):1383-1384. doi: 10.1093/ecco-icc/jiy167. PubMed PMID: 30496447.
- 7. Maaser C, Sturm A, Vavricka SR, Kucharzik T, (...), Stoker J; European Crohn's and Colitis Organisation [ECCO] and the European Society of Gastrointestinal and Abdominal Radiology [ESGAR]. ECCO-ESGAR Guideline for Diagnostic Assessment in IBD Part 1, 2: Initial diagnosis, monitoring of known IBD, detection of complications. J Crohns Colitis. 2019 Feb 1;13(2):144-164. doi: 10.1093/ecco-jcc/jjy113. PubMed PMID: 30137275.
- Novak K, (...), Kucharzik T, (...), Maaser C. Clinic-based Point of Care Transabdominal Ultrasound for Monitoring Crohn's Disease: Impact on Clinical Decision Making. J Crohns Colitis. 2015 Sep;9(9):795-801. doi: 10.1093/ecco-jcc/jjv105. Epub 2015 Jun 16. PubMed PMID: 26079723.
- Cravo ML, (...), Palmela C, (...), Baracos V. Lower skeletal muscle attenuation and high visceral fat index are associated with complicated disease in patients with Crohn's disease: An exploratory study. Clin Nutr ESPEN. 2017 Oct; 21:79-85. doi: 10.1016/j.clnesp.2017.04.005. Epub 2017 Jul 4. PubMed PMID: 30014873.
- 10. Carter D, (...), Eliakim R. The accuracy of intestinal ultrasound compared with small bowel capsule endoscopy in assessment of suspected Crohn's disease in patients with negative ileocolonoscopy. Therap Adv Gastroenterol. 2018 Apr 9;11:1756284818765908. doi: 10.1177/1756284818765908. eCollection 2018. PubMed PMID: 29662538; PubMed Central PMCID: PMC5894899.
- 11. Kotze PG, (...), Novak KL, (...), Panaccione R. Real-world clinical, endoscopic and radiographic efficacy of vedolizumab for the treatment of inflammatory bowel disease. Aliment Pharmacol Ther. 2018 Sep;48(6):626-637. doi: 10.1111/apt.14919. Epub 2018 Jul 31. PubMed PMID: 30063077.
- 12. Wilkens R, (...), Krogh K. Validity of Contrast-enhanced Ultrasonography and Dynamic Contrast-enhanced MR Enterography in the Assessment of Transmural Activity and Fibrosis in Crohn's Disease. J Crohns Colitis. 2018 Jan 5;12(1):48-56. doi: 10.1093/ecco-jcc/jjx111. PubMed PMID: 28981627.
- 13. Calabrese E, Kucharzik T, Maaser C, Maconi G, (...), Novak KL, (...), Monteleone G. Real-time Interobserver Agreement in Bowel Ultrasonography for Diagnostic Assessment in Patients With Crohn's Disease: An International Multicenter Study. Inflamm Bowel Dis. 2018 Apr 28. doi: 10.1093/ibd/izy091. [Epub ahead of print] PubMed PMID: 29718450.

Study Centers

We offer research consulting and collaboration within the field of inflammatory bowel diseases, mainly Crohn's Disease and Ulcerative Colitis. We have great expertise in designing studies, defining endpoints and have a large professional network.



We need you!

We are looking for new study

Guideline

Intestinal Ultrasound Standardized Image Acquisition for Central Reading

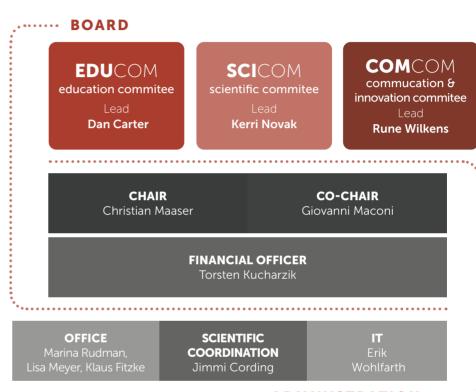
The aim of this publication, is to provide standardized guidance to expert clinicians regarding image acquisition during intestinal ultrasound assessment with the intent of centralized reading (for example, for the purpose of evaluation during clinical trials). The purpose is to best standardized image acquisition, to improve consistency in interpretation.

Topics & Key Questions

- Image Acquisition Guidelines
- Bowel wall thickness
- Mesenteric, inflammatory fat
- Echostratification
- Color Doppler Imaging

Structure

Non-profit association International Bowel Ultrasound Group e.V.



ADMINISTRATION

Our Executive Board

Christian Maaser Chair, Prof. Dr., MD Klinikum Lüneburg, Germany

Giovanni Maconi Ass. Prof., MD Luigi Sacco University Hospital, Milan, Italy

Kim Nylund MD, PhD Haukeland University Hospital, Bergen, Norway

Dan Carter MD FEBGH Chaim Sheba Medical Center, Israel Carolina Palmela MD Hospital Beatriz Ângelo, Lisboa, Portugal

Torsten Kucharzik Prof. Dr. MD, PhD Klinikum Lüneburg, Germany

Kerri L Novak Assoc. Prof., MD, MSc, FRCPC Foothills Medical Centre, Calgary, AB, Canada

Rune L Wilkens MD, PhD Hvidovre Hospital, Gastrounit, Division of Medicine, University of Copenhagen, Denmark

Our Members



IBUS GROUP MEMBERS

Everybody is welcome to join the IBUS Group. Anybody wanting to become a member of the Association has to submit a written application. The application form can be found online under www.ibus-group.org.

For becoming a corporate member, please contact the IBUS Group office.

Corporate Members

PLATINUM GOLD SILVER

Platinum

Takeda

Gold

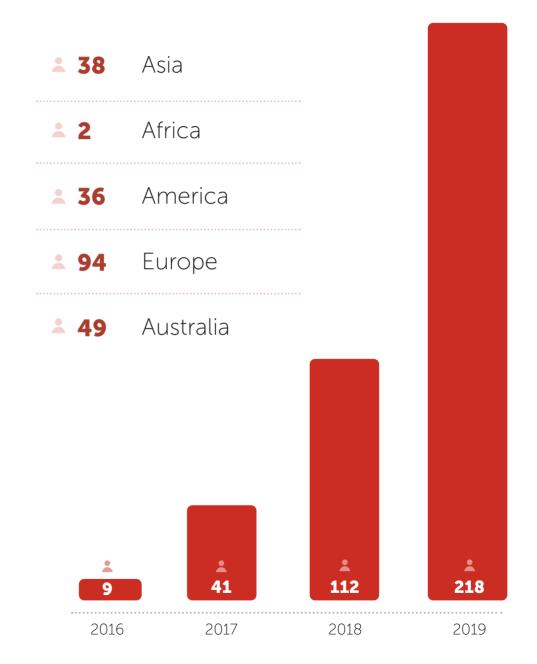
Fizer

Gold

G

Membership

Location and growth



Office

The IBUS Office is the first contact for members and everyone interested in a membership. The team is in charge of the following:

- Administration and information of the members
- Event management in the framework of the IBUS training curriculum
- Clinical trial management including IT solutions



Dr. Jimmi CordingClinical trial project coordinator | Berlin jc@bowel-ultrasound.org



Klaus Fitzke Managing director | Kiel kf@bowel-ultrasound.org



Erik Wohlfarth Head of IT | Berlin ew@bowel-ultrasound.org



Lisa MeyerEvent manager | Kiel
lm@bowel-ultrasound.org



Marina RudmanOffice manager | Berlin
office@bowel-ultrasound.org

Clinical trial project coordinator | Berlin mr@bowel-ultrasound.org

IBUS Membership Meeting

Dear IBUS-Members.

We look forward to seeing you at our next membership meeting in Vienna at ECCO, February 12th, 2020. We and the other IBUS board members would be happy to meet with you in person. We look forward to celebrating IBUS' successes, while looking to the future as we work together to set goals for the next year. We also welcome your participation in our organization, as elections for the IBUS board will occur every three years.

We are very much looking forward to seeing you soon in Vienna!

Christian Maaser MD/ PhD, IBUS chair



European Crohn's and Colitis Organisation Wednesday, 12th February 2020 6:15 - 7:45 p.m. in Vienna at the ECCO conference venue

Agenda:

- Welcome Christian Maaser
- 2. Official Hand over of the 1st IBUS-ECCO research grant Kerri Novak + Marc Ferrante
- 3. Report from IBUS chair Christian Maaser
- 4. EduCom report Dan Carter
- 5. SciCom report Kerri Novak
- 6. ComCom report Rune Wilkens
- 7. Update sponsors Torsten Kucharzik
- 8. Finance report Klaus Fitzke
- 9. Election of board members
- 10. News from our platinum sponsors
- 11. IUS abstracts at ECCO 2020
- 12. National initiatives: GENIUS Jake Begun
- 13. Miscellaneous



Partnerships



Gastroenterology Network of Intestinal Ultrasound (GENIUS)

IBUS works closely with key members of the GENIUS to facilitate and certify training and in research collaboration.

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International Bowel Ultrasound Group e.V. Harkortstr. 1 D-48163 Münster | Germany

Represented by Chair Prof. Dr. Christian Maaser