Rome Visiting Scholar at Drossman Gastroenterology: April 16-18, 2019



Name: Jill Deutsch, MD Position: Clinical Fellow in Training Institution: Yale University School of Medicine Date: April 16-18, 2019

As part of the Rome Foundation's Visiting Scholars program, Jill Deutsch, a clinical fellow in training at Yale University School of Medicine—Yale New Haven Hospital, visited and worked with Dr. Drossman and his physician assistant Meghan Huff earlier this spring. Jill, a rising third year fellow in Digestive Diseases, deals frequently with the brain-gut connection in her practice. Jill developed her interest in this aspect of gastroenterology in part due to her background as a 200-hour registered yoga teacher, and in part due to her study of physician wellbeing and happiness, about which she has written extensively. She spent the past year of her fellowship training honing her diagnostic and therapeutic approach to patients with complex functional and defecatory disorders.

In addition to visiting with Dr. Drossman, the program also included visits with Dr. William Whitehead, PhD and Dr. Olafur Palsson, Psyc. D. at the University of North Carolina Center for Functional GI and Motility Disorders as well as Dr. Anne Peery, MD also at the University of North Carolina. Jill gained valuable insights in the multidisciplinary approach to the patient with functional bowel disorders and discussed her plans for her final year of fellowship training.

Jill's goal in participating in the Rome Foundation's Visiting Scholars program was to better understand the approach to patients with complicated functional GI disorders through the biopsychosocial approach, which Dr. Drossman utilizes and about which he educates practitioners. During her visit she also learned more about the use of hypnotherapy and biofeedback to treat functional GI disorders. She also improved her clinical decision making and increased her knowledge of the use of central neuromodulators for this unique group of patients. Jill is excited to provide a brief summary of her visit below and is eager to spend more time with Dr. Drossman as her career launches.

As a fellow in training, how are you receiving education and training in the diagnosis and treatment of patients with functional GI disorders?

It is well established that nearly half of all patients who seek evaluation in a gastroenterologist's office have a motility or functional GI disorder, yet so few gastroenterologists are excited about investing the time necessary to really treat these disorders. I have spent time working with my mentors at Yale, Dr. Rosemarie Fisher and Dr. David Hass, who both are interested in this area. They have both taught me the skills that are so important to effectively communicate with these "difficult" patients. I have also gained significant knowledge through reading the Rome Foundation guidelines and recent research publications, and have sought opportunities to attend Rome Foundation meetings and other conferences where nationally and internationally recognized experts in the field attend. Most importantly, though, I make myself available to my patients and have noticed that this proclamation of support tends to be one of the most important factors in successfully treating patients with functional GI disorders.

How did you find Drossman Gastroenterology and what interested you in learning more about functional GI disorders from Dr. Drossman?

I attended a conference organized by Dr. Nikolaos Pyrsopoulos, the Chief of Gastroenterology & Hepatology at Rutgers New Jersey Medical School (where I completed medical school, residency and chief year in Internal Medicine) at which Dr. Drossman was a guest speaker. I knew that I needed to seek opportunities to learn from the experts on functional GI disorders in order to become a well-rounded physician who can treat patients as a whole, taking into account not just their gut symptoms, but also the psychology that often contributes to, or is attributed to, their bowel problems. I introduced myself to Dr. Drossman and we spoke the following week about my interests. He asked me to come to North Carolina to spend some time with him and to meet some members of the UNC faculty who could help direct me in the last year of my GI training.

Do you think your experience with Dr. Drossman will change your practice going forward?

Absolutely! Dr. Drossman supported my use of two major tools that I am only beginning to develop: mindfulness meditation including breathing exercises and mindset. Through my study of the practice of yoga I learned a lot about meditation, and with my background in wellness and resilience during residency and fellowship, I learned about the psychology behind positivity and happiness. Dr. Drossman encouraged me to use these skills to direct conversations with patients and to employ the biopsychosocial approach.

While I had read articles and research on the use of neuromodulators for functional GI disorders, I still felt quite uncomfortable with using them for my patients. This discomfort stemmed from a large veteran population during my first year of training in gastroenterology, most of whom were already on multiple similar medications. Dr. Drossman educated me on the use of these medications, and provided me with further insight on knowing when it is appropriate to change a patient's medication regimen for their symptoms.

Additionally, because of my meeting with Drs. Whitehead and Palsson, I am more excited to spend time during my final year of training in becoming a practitioner of hypnotherapy and better understanding biofeedback for pelvic floor disorders.

What advice can you give to other fellows still in training who are also interested in treating patients with functional GI disorders?

Don't be afraid to focus your practice on these patients! Don't allow the stigma of "difficult" patients to steer you away from people who suffer from functional GI disorders. In fact, one of Dr. Drossman's patients reinforced for me that there are no difficult patients, only difficult diagnoses. One patient who Dr. Drossman and I met together during my time working with him, impressed this upon me; Dr.

Drossman was probably this patient's tenth gastroenterologist and most of his doctors threw their hands up after CT scans, medications and even surgery for his chronic abdominal pain. After spending time with this patient, we were able to provide him reassurance that we could help improve his pain, but also gave him the tools to continue moving his life forward despite a near 30 year history of frustration with his body. I think this is a huge takeaway from my time with Dr. Drossman.