

Essential reading from the editorial board

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Dear reader,

We are delighted to present you with a brand new issue of *Acta Gastro-Enterologica Belgica*. In this edition you will not only find our usual offering of high-quality original manuscripts, reviews and case reports. The first issue of each year traditionally also includes all abstracts accepted for the Belgian Week of Gastroenterology (February 11th-13th 2026, Antwerp, Belgium). This rich collection is well worth browsing through, as it paints an impressive picture of the wide range of basic and clinical research that was (and is) performed in Belgium, in all fields of gastroenterology and hepatology. Including this catalogue in *Acta* is the result of a longstanding, logical and fruitful collaboration between *Acta Gastro-Enterologica Belgica* and the Belgian Week of Gastroenterology, as both organisations have always provided a platform for national research achievements and will continue to do so in the years to come.

To illustrate this commitment, you will find several original manuscripts from Belgian soil in this issue. Lazarenko and colleagues provide a real-world view on the efficacy and safety of [¹⁷⁷Lu]Lu-DOTA-TATE peptide receptor radionuclide therapy in 110 patients with metastatic gastroenteropancreatic neuroendocrine tumours (1). This post-marketing study in a Belgian population shows that this therapy resulted in a median progression-free survival of 22.5 months, and overall survival of 42.3 months. These data are in line with phase 3 clinical trial results, confirming the evidence-based critical role of radionuclide therapy in NET.

Vandewinckele and colleagues retrospectively evaluated the impact of a centralized tumour board (University Hospital Ghent) on the diagnosis and management of 217 newly diagnosed pancreatic lesions referred for the evaluation of surgical resection (2). 20% of benign referrals were reclassified as malignant, emphasizing the crucial role of multidisciplinary discussion in an expert center for these lesions.

Telemedicine provides an interesting but currently still underutilized surveillance method in complex chronic disorders. In this issue of *Acta* we present 2 timely manuscripts on this topic from the tertiary IBD teams in University Hospital Leuven and Cliniques Universitaires Saint-Luc in Brussels respectively. Brams and colleagues performed a feasibility survey among their patient population, showing that 76% of

patients were interested in reducing the number of outpatient clinic visits if remote monitoring would be implemented, as this would result in significant cost and time savings (3). This patient interested was confirmed in the Brussels cohort of IBD patients, with 82% expressing interest in telemedicine. Importantly, Troch and colleagues stress the logical concern of diminished personal contact between patient and physician, which should be taken into account when implementing remote medicine in clinical practice (eg by using high-quality video consultations rather than the more anonymous telephone calls).

As always, you can also find several interesting case reports which will undoubtedly prove relevant and useful for your everyday clinical practice.

Enjoy your *Acta*,

Heiko De Schepper & Astrid Marot

References

1. Lazarenko I, Mileva M, Manta R, Kristanto P, Hendlisz A, Van Laethem J-L, *et al*. Real-World Outcomes of [¹⁷⁷Lu]Lu-DOTA-TATE Peptide Receptor Radionuclide Therapy in Patients with Metastatic Gastroenteropancreatic Neuroendocrine Tumors: Data from a Belgian ENETS Center of Excellence. *Acta Gastroenterol Belg*. 2026;89:13-24. doi: 10.51821/89.1.14882
2. Vandewinckele J, Ribeiro S, Callebout E, D'Cruz V, Hindryckx P, Gryspeerdt F, *et al*. Impact of a centralised pancreaticobiliary tumour board on the diagnosis of pancreatic lesions. *Acta Gastroenterol Belg*. 2026;89:33-41. doi: 10.51821/89.1.14671
3. Brams S, Beeckmans D, Delen S, Fierens L, Vanhaverbeke M, Sabino J, *et al*. Estimated benefits and willingness of remote monitoring in IBD patients in remission under maintenance therapy: results of a questionnaire in a tertiary referral centre. *Acta Gastroenterol Belg*. 2026;89:43-53. doi: 10.51821/89.1.14413
4. Troch K, Piessevaux H, Dewit O. Preferences and acceptability of telemedicine in Belgian IBD patients. *Acta Gastroenterol Belg*. 2026;89:55-64. doi: 10.51821/89.1.14704

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