

## Editorial

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In this issue several important original papers as well as extensive reviews can be highlighted.

The management of pelvic abscesses is usually challenging and the drainage is mandatory to avoid pelvis sepsis. Recently, minimally invasive techniques, including endoscopic ultrasound- guided transrectal drainage have been associated with a high success rates and good safety results (1). Peeters et al retrospectively analysed 17 patients with pelvic abscess and demonstrated a success rate of the technique of 100% defined by a resolution of the abscess. The full details of the technique are described in the original manuscript. In the hepatic section, since the picture of cirrhosis has changed in the last 2 decades with more metabolic dysfunction-associated steatotic liver diseases (2), Kaze et al aimed to assess whether the epidemiological and the clinical course of hepatocellular carcinoma had also changed over the last 25 years. By comparing two cohorts respectively before and after 2005 no major epidemiological changes were found except a higher rate of Alcohol-related HCC in the old cohort compared to the recent cohort. Metabolic dysfunction was similar with 10% in all groups.

The review section includes three interesting papers about functional disorders management. The first one

reviewed the literature on the efficacy of neuromodulators in functional dyspepsia. They conclude that the best evidence supported the efficacy of tricyclic antidepressant (3). The second one reviewed the efficacy in eosinophilic esophagitis of new swallowed topical corticosteroid formulations like budesonide orodispersible tablet and budesonide oral suspension. These new formulations were more effective than placebo. The third paper discussed Non-esophageal eosinophilic gastrointestinal diseases including eosinophilic gastritis, eosinophilic enteritis and eosinophilic colitis. The authors provide an overview of the latest insights in the pathophysiology, diagnostic approach and available treatment options.

## References

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