*Nature Reviews Gastroenterology & Hepatology* **10**, 442 (2013); published online 16 July 2013; doi:10.1038/nrgastro.2013.130; doi:10.1038/nrgastro.2013.132; doi:10.1038/nrgastro.2013.131;

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# **IN BRIEF**

# LIVER

## How caffeine affects liver fibrosis is revealed

A recent study has found that caffeine inhibits the adhesion and activation of hepatic stellate cells, which attenuates the progression of liver fibrosis. The researchers assessed cell migration and proliferation of LX-2 cells (an immortalized human hepatic stellate cell line) *in vitro* in the presence of different caffeine concentrations. Liver fibrosis and inflammation were assessed in rats treated with and without caffeine supplementation. In the LX-2 cells, caffeine increased apoptosis and the expression of F-actin and cAMP. In the rats, caffeine decreased periportal inflammation, levels of inflammatory cells and fibrosis.

Original article Shim, S. G. et. al. Caffeine attenuates liver fibrosis via defective adhesion of hepatic stellate cells in cirrhotic model. J. Gastroenterol. Hepatol. doi:10.1111/jgh.12317

# **COLORECTAL CANCER**

#### Low doses of aspirin reduce risk of colorectal cancer

An analysis of Taiwan's National Health Insurance research database has found that long-term use of low-dose aspirin (50–150 mg per day) is associated with a reduced incidence of colorectal cancer (CRC) in patients with high cardiovascular risk. Aspirin users were matched with nonusers and were followed up for a median of 8.9 years. Over this time, 129 nonusers and 14 users of aspirin developed CRC, which corresponds to incidence rates of 180.43 and 79.42 per 100,000 person-years, respectively.

**Original article** Huang, W.-K. *et. al.* The association between low-dose aspirin use and the incidence of colorectal cancer: a nationwide cohort study. *Aliment. Pharmacol. Ther.* doi:10.1111/apt.12388

## **CROHN'S DISEASE**

## Azathioprine is not better than placebo

A prospective double-blind trial has assessed the use of azathioprine in adults with a recent (<8 weeks) diagnosis of Crohn's disease. The patients were randomly assigned to receive azathioprine (n=68) or placebo (n=63) and were followed up for 76 weeks. The rates of relapse and steroid requirements were similar for the two groups. The researchers conclude that early therapy with azathoprine is no more effective than placebo for achieving sustained steroid-free remission in adults with Crohn's disease.

**Original article** Panés, J. *et. al.* Early azathioprine therapy is no more effective than placebo for newly diagnosed Crohn's disease. *Gastroenterology* doi:10.1053/j.gastro.2013.06.009

## SCREENING

## Risk factors in patients undergoing CT colonography

The authors of a new study have determined which risk factors are important predictors of advanced neoplasia in patients being screened with CT colonography. 276 of 7,620 such patients were diagnosed with advanced neoplasia. They found that age and sex were important predictors of the risk of advanced neoplasia in these patients. However, BMI and a positive family history of colorectal cancer were not. The authors suggest that these findings have implications for the appropriate selection of patients for screening.

Original article Hassan, C. et. al. Computed tomographic colonography for colorectal cancer screening. *Cancer* 199, 2549–2554 (2013)