

## Editorial

Inflammatory bowel diseases (IBD) are chronic, immune-mediated conditions with an increasing prevalence worldwide, including in Slovenia. Recent epidemiological data confirm rising incidence and prevalence in both adult and pediatric populations, placing IBD among the most significant chronic gastrointestinal diseases in terms of long-term burden, health-care costs, and impact on patients' quality of life.

Therapeutic options have expanded considerably in the past decade. In addition to conventional agents, several classes of biologics with distinct mechanisms of action are now available, alongside small molecules such as JAK inhibitors and S1P modulators. These advances broaden our ability to tailor therapy but also underscore the need for careful positioning, sequencing, and safety monitoring. Treatment goals are increasingly guided by the treat-to-target concept and STRIDE II recommendations, emphasizing clinical remission, normalization of biomarkers, and endoscopic healing as key milestones.

Optimal IBD care must be multidisciplinary. Gastroenterologists, radiologists, endoscopists, surgeons, pharmacists, clinical dietitians, and psychologists all play essential roles in addressing the complex needs of these patients. Diagnostic tools have also advanced, with intestinal ultrasound joining colonoscopy and MRI as valuable, non-invasive modality for monitoring disease activity.

Despite this progress, one of the greatest challenges remains identifying the right treatment for the right patient at the right time. Predictors of therapeutic response, ranging from clinical features to biomarkers, genetics, pharmacokinetics, and microbiome signatures, are urgently needed to guide individualized strategies. The integration of such tools into clinical practice will be central to implementing precision medicine in IBD.

The 1st Slovenian International IBD Congress provides an important platform to exchange knowledge, share experiences, and foster collaborations. It is our hope that the discussions and insights presented here will accelerate the translation of evidence into practice and contribute to better outcomes for patients with IBD in Slovenia and beyond.

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