



A Brief History of the American Foregut Society  
Felice Schnoll-Sussman and Reginald Bell

The American Foregut Society was born out of many individuals' dreams and passions to see a specialty thrive and flourish. A hope that different disciplines could work together to accomplish lofty goals. A desire to break down silos and build bridges. Not a simple task by any stretch of the imagination. The ethos was that we would be "better together". Who is the we? Foregut surgeons and gastroenterologists – the main physician stakeholders in the management of patients with diseases of the foregut. Some would think that the American Foregut Society, now more commonly referred to as AFS, was an evolution – in reality it represents a revolution. A revolutionary change in the way different specialties work together, learn together, advocate together and grow together with a single-minded purpose – collaboration and specialization to improve patient care.

The small group of foregut surgical specialists providing the initial impetus to form the AFS immediately recognized the necessity of partnering with medical foregut specialists. Without both specialties the goals and survival of such an effort would flounder. Tripp Buckley, a general surgeon, had been proctored in his first sphincter augmentation procedure (LINX™) by the world renowned and revered Dr. Tom DeMeester and found himself navigating his practice to one dedicated to the management of GERD. Dr. Reginald Bell, a private practice foregut surgeon in Colorado developed a multicenter Registry of Outcomes in Anti-Reflux Surgery (ROARS) to prospectively collect outcomes for laparoscopic fundoplication and magnetic sphincter augmentation. Dr. John Lipham was trained by and accorded resultant recognition by Tom DeMeester as chief of upper GI surgery at the Keck School of Medicine in USC. Dr. Blair Jobe is a brilliant basic science and clinical researcher and foregut surgeon in Pittsburgh. Dr. Dan Lister, a private practice foregut surgeon in Heber Springs Arkansas, has the largest

Barrett's surveillance population in the state. Kate Freeman N.P. works with Dr. Bell and would become instrumental in implementing the vision of this inchoate society. Bell, Buckley, Freeman, Jobe, Lipham and Lister met after a LINX users meeting in Chicago on September 23 2017 to discuss the idea of a specialty and as-yet unnamed society. Paramount to the goals were establishing collaboration between specialties and forging a path to true specialization in the disease. The surgeons were all involved in training other surgeons in a new technology, magnetic sphincter augmentation (LINX). It was obvious to the group that LINX needed to be in the hands of surgeons dedicated to the practice of foregut surgery or it could be the beginning of the end of the technique.

Blair Jobe should be credited for voicing that only a grass-roots movement could create this new society in the current environment. Tripp Buckley had founded a non-profit corporation, The Heartburn Foundation, in 2014. The Heartburn Foundation was dedicated to improving care of patients with foregut disease (His initial board members were his mother, and best friend from high school.) Tripp graciously allowed The Heartburn Foundation to be the legal and financial basis of this new society. Knowing the importance of a society name that corresponded to a URL, Dan Lister researched availability and the American Foregut Society, [www.americanforegutsociety.org](http://www.americanforegutsociety.org), with an avatar [www.foregut.org](http://www.foregut.org), was registered in April 2018. Discussions continued in March 2018 during the annual Foregut Disease Foundation meeting on esophageal disorders held in Hawaii. At the time this was the only recurring locus for surgeons and gastroenterologists to meet and talk. It was (and still is) a 5-day, intensive (and often intense) in-depth series of lectures and debates, and leaves the afternoons free for socializing. Over beers and Mai Tais, gastroenterologists including Mike Smith were receptive to the



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concept and committed to bringing the society to fruition. Shortly thereafter the grass-roots movement began with emails sent to about 100 key opinion leaders in foregut. The message was simple: *“A group of us (Blair Jobe, Reg Bell, Tripp Buckley, Dan Lister, John Lipham) are trying to form a Foregut Society to better position ourselves in regard to research, education/training/fellowships, and ultimately develop COEs around Foregut disease. The initial step is changing our current non-profit foundation from the Heartburn Foundation to the Foregut Foundation and recruit select Foregut Surgeons / GIs to jump on board. No real costs/dues at this point. We are just trying to get a core group together that could help steer this ultimately into a formal Foregut Society. If you are interested, let me know and we will put your name on the initial membership list that we will soon present to Ethicon and other Industry leaders in order to get some financial support to get this off the ground. Let me know. Thanks!”*

Of the 100 emails sent, 98 responses were not only positive they were enthusiastic . Though the positive response was possibly because no fee was associated with the request, subsequent developments showed otherwise.

At SAGES in April 2018 members presented to Ethicon the concept of the society and a request for financial support. Ethicon had acquired Torax Medical, manufacturer of the LINX device, and continued Torax Medical’s commitment to specialization as well as engaging gastroenterologists as key to the best use of the LINX device. Ethicon supported the concept in principle and financially, laying the foundation for further societal interaction with industry. An interim board initially consisting of Jobe, Lipham, Buckley, Bell, Freeman, and Mike Smith put forth their own funds to hire a consulting firm to help guide them through the formation of

the society – its goals, vision, mission, size, financial plan, and organizational structure. An unsociety society, starting from scratch without preconceptions of what a society should be. Over the summer of 2018 this interim board (which now included Ken Chang, David Katzka, John Pandolfino, Joel Richter, and Rena Yadlapati) met in person monthly and more often by phone or email (this was pre-Zoom), and some found time to relax together at a Cubbies game in Chicago.



*Figure 1: The initial interim board, Chicago June 9 2018. From Left to right: Reginald Bell, Kate Freeman, Tripp Buckley, Mike Smith, John Lipham, Dan Lister, John Pandolfino (Blair Jobe in absentia)..*



*Figure 2: Enjoying a rare moment of relaxation*

Bringing early reality to this dream of a society in the form of an inaugural annual meeting would deliver the message to a broader audience, initiate the conversations between gastroenterologists and foregut surgeons and establish industry ties. John Lipham’s “go big or go home” encouraged needed contributions from board members to supplement the grant from Ethicon for the needed financial commitment to host the inaugural meeting in Las Vegas in March 2019. Dr. Felice Schnoll-Sussman, a gastroenterologist at Weill Cornell in NYC, and Reg Bell were course directors. Kate Freeman, who would become the executive director of AFS, along with the interim board and course directors hosted 550 attendees at a 3-day, state of the art meeting with over 40 state-of-the-art lectures from as many leaders in their respective fields.



*Figure 3: The inaugural AFS annual meeting, March 15, 2019*

On the heels of an incredibly successful meeting the inaugural AFS board was convened to deliver on the mission of improving education, patient care and outcomes in the diseases of the foregut.



*Figure 4: The inaugural AFS Board, 2019. From left to right: Mike Smith, Phil Katz, Felice Schnoll-Sussman, Christy Dunst, Kate Freeman, Santiago Horgan, John Lipham, Ken Chang, Dan Lister, Peter Kahrilas, Reg Bell, Tripp Buckley, Rena Yadlapati, Bob Ganz.*

With that our vision became clear: “To advocate personalized treatment strategies for patients with foregut disease through a collaborative partnership across disciplines”. Our mission is “To help guide both the diagnosis and management of Foregut disease through collaboration between Gastroenterologists and Foregut Surgeons. To foster research that will culminate in the development of benchmarks for excellence while also establishing specialty specific training programs that will ultimately translate into the improved care, safety and value for patients with Foregut diseases.”

Committees formed, individualized sponsor relationships were developed, a journal (later to be appropriately named 'Foregut' with co-editors Philip Katz and Brian Louie). was founded. The 501c3 AFS Foundation was established to provide long-term backing for the society's goals of improving patient care including patient education and research.

Then COVID altered everyone's course in 2020; the planned in-person meeting for March was delayed until June, then September, and we all pivoted to virtual. Despite these barriers, over XXX people attended! Though Felice could not be physically present, her rousing "whoop whoop" cheered the exhausted in-person program committee!



*Figure 5: An exhausted crew, September 26 2020.*



A decision to keep the annual meeting in September led to an in-person 2021 meeting (fortuitously at a lull in COVID's pandemonium) at the Gaylord Opryland with over XXXX in attendance



*Figure 6: The AFS Board at the annual meeting in Opryland September 23, 2021. From left to right: Lee Swanstrom, Ken Chang, Phil Katz, Joel Richter, Dan Lister, Mike Smith, John Lipham, Felice Schnoll-Sussman, Reg Bell, Prakash Gyawali, Peter Kahrilas, Christy Dunst, Kerry Dunbar*

Very early in this course, Ninh Nguyen (? Others) had a vision for a textbook of foregut disease with chapters co-authored by gastroenterologists and surgeons, convinced Springer of the value of this endeavor; and it is through his vision and strong encouragement that this textbook has been brought to fruition.



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The American Foregut Society is still in its defining stages with the desire to forge deep collaborative ties between foregut surgeons and gastroenterologists at the epicenter. The future is bright, and the time is now - “we **are** better together”.