



# REACH-IBD Newsletter *Winter 2025*

A graphic titled "Sonny's Spotlight" on a dark blue background. It features a spotlight icon on the left, a circular portrait of a man with a beard and glasses on the right, and a list of topics in the center: "Congress Patient Reporters", "Event News", "Interview with Tina Ha", and "AND MORE!".

**Sonny's Spotlight**

- Congress Patient Reporters
- Event News
- Interview with Tina Ha
- AND MORE!

Will we see you at the Congress REACH-IBD event?

***LEARN MORE AND RSVP***

A photograph of two male doctors in white lab coats. One doctor is holding a blue clipboard and looking at it, while the other is looking down at something in his hands.

**2025-2026 VISITING IBD  
OBSERVERSHIP  
PROGRAM**

***APPLY BY 3/1***

# Building Connections and Advancing IBD Care

*A Conversation with Dr. Tina Ha, Director of the IBD Section at Mayo Clinic*

**Suha Abushamma for REACH-IBD: Tell us a little about yourself and your interest in IBD.**

*Dr. Tina Ha:* Hi, I'm the Director of the IBD Section at Mayo Clinic in Arizona. My interest in IBD started during my fourth year of medical school. Initially, I was on track to become a surgeon. I was actually considering becoming an ENT focusing on head and neck cancer because I was fascinated by the anatomy. But during a GI elective at Mount Sinai in New York, I encountered patients with Crohn's disease and ulcerative colitis for the first time. That experience was transformative! I recognized that I didn't want a specialty solely focused on procedures or surgeries.



*OG REACH-IBD memories*

I was drawn to the cerebral aspects of IBD, the complexity of the cases, and the ongoing journey with patients. Procedures were still involved, of course. But I wanted to focus on long-term patient relationships. I like how patient encounters often leave you with more questions than answers, motivating you to explore further - improving care, advancing research. I also love that the IBD field is a team-based sport, involving patients, providers, allied healthcare. You interact with colleagues across multiple disciplines, institutions, and walks of life, as well as with organizations like the Crohn's & Colitis Foundation.

**Who are some of your mentors, and what wisdom have they shared with you?**

Throughout every stage of my career, I accumulate more mentors! During my residency and fellowship at WashU in St. Louis, Dr. Matt Ciorba inspired my interest in researching IBD and aging, sparking my academic journey. At Mount Sinai, I had the privilege of learning from legends like Dr. Dan Present and Dr. David Sachar – you’re going to find few other people with that kind of clinical acumen. The great Dr. Lloyd Mayer, who excelled in immunology, the science, the education, and the clinical practice, was a very important mentor to me.

From a clinical practice standpoint and navigating the IBD atmosphere, Dr. Asher Kornbluth was great, introducing me to a lot of colleagues.

And who doesn’t love Dr. Steph Targan? When I moved over to Cedars-Sinai, regular chats with Dr. Targan refined my research ideas and helped me recognize patterns in clinical practice.



*Founding members of REACH-IBD*

To this day, all these folks are on my Rolodex, but I also consider my REACH-IBD colleagues my mentors and communicate with them daily.

**How did you start REACH-IBD, and how has it impacted your career?**

REACH-IBD began when we noticed a gap in peer support among junior faculty. While senior IBD faculty had a strong sense of collegiality, mentoring, and collaboration, this was often missing for those just starting their careers.



The closest example we had was the BRIDGE Group that included people like Corey Siegel, Gil Melmed, Laura Raffals, and Adam Cheifetz. So about six or seven of us decided to create a peer network for junior faculty and fellows because that's the toughest time. You're trying to figure out your niche. It can be tough to identify collaborators, especially if you're away from your mentors for the first time.

The goal was to foster connections, enable research collaborations, and build a community for discussing clinical challenges. Aligning with the Crohn's & Colitis Foundation allowed us to broaden our impact and learn how to contribute on a national scale. We wanted REACH-IBD, which stands for Rising Educators, Academics, and Clinicians Helping IBD, to be inclusive of pediatric and adult IBD domains, translational research, basic science, and clinical education.

We're very proud and glad to see that it's passed over from hands to hands. REACH-IBD has evolved

significantly, and I'm especially proud that it's now a standing committee within the Foundation's NSAC. It's a testament to the importance of nurturing early-career professionals to advance IBD care and research.







Our version focuses on creating a standardized curriculum for advanced IBD fellows, incorporating self-study, team-based learning, and peer networking. We also wanted to expose the advanced IBD fellows to each other as well as to a robust group of faculty from across disease specialties.

We also revived the Milestone IBD Retreat, an intimate setting where fellows interact with wonderful faculty, build collaborations, and establish peer networks.

We're hoping it has the same impact on advanced IBD fellows as Dr. Targan's conference had for us years ago.

So far, the feedback has been overwhelmingly positive and a lot of important collaborations have resulted.

**I can testify to how amazing the program is and the impact it's had on all of us. Finally, what are some of your hobbies?**

My gosh, hobbies. Who has hobbies? I do love cooking, hiking, and spending time with my family, friends, and my Golden Retriever, Sebastian. She's a huge supporter of the Crohn's & Colitis Foundation. Even though she refuses to walk in Take Steps, she is an avid cheerleader for all who do! ♦



# Meet the Patient Reporters for Crohn's & Colitis Congress® 2025!

## NATALIE HAYDEN



I was diagnosed with Crohn's disease at age 21, in July 2005, just two months after graduating from college. The diagnosis completely blindsided me -- I had no family history and had been extremely healthy prior to experiencing abdominal pain, fatigue, weight loss, and trouble eating and drinking.

After appointments, tests, and ER visits, a CT scan and rectal exam finally confirmed Crohn's disease. I was extremely malnourished, with a hemoglobin level of 7, and was hospitalized for a week. I left the hospital on 22 pills a day, feeling like my life had come to a standstill. I had aspirations to work in TV news, but I didn't know what the future would hold.

At the time, there wasn't much of an IBD community online. Facebook had only just come out. I felt extremely isolated.

Despite these challenges, I pursued my dreams, working as a news anchor, reporter, and producer at stations in Minnesota, Wisconsin, and Illinois.

I never shared my diagnosis publicly to avoid being seen as "less than," despite being hospitalized several times.

In 2014, I left the news desk, at the peak of my illness. After a decade without remission, I underwent bowel resection surgery. While recovering, I decided to start a blog. I'd never written a blog, I wasn't a patient advocate, I didn't really know how to get involved in the community. I just focused on being the voice I had needed when I was first diagnosed. launching [Lights, Camera, Crohn's](#) in 2016.





I had been aware of the Foundation since early in my diagnosis, thanks to family friends who had Crohn's and ulcerative colitis.

My first connection was participating in the Take Steps walk in Chicago in 2011, where I joined my family and friends. I was honored to serve as the Take Steps "Honored Hero" in 2015, shortly before my surgery.

After launching my advocacy work, I deepened my involvement with the Foundation, and so did my family. Even My brothers have participated in Team Challenge events. I've collaborated with the Foundation on interviews and articles as an IBD Insider. I'm currently a social media ambassador and have served as the emcee for the Hope Gala for the Mid-America Chapter for three years running.

It's an incredible honor to be chosen as a patient reporter for Congress. It allows me to bring the patient voice to the table. We know what the community is curious about and can translate complex medical jargon into digestible, relatable information. I love that I can use my journalism skills to tell compelling stories in ways that patients can understand



and connect with.

Attending Congress alongside patients, doctors, and researchers presents a unique opportunity to connect the medical community with those living with IBD. I look forward to meeting many of you — please feel free to introduce yourselves! I'm always looking to collaborate with medical professionals to add credibility and depth to the stories I share on [Light's, Camera, Crohn's](#) or other digital health channels. ♦





# KAYLAA' WHITE

That's where I first learned about the National Council of College Leaders.

I was initially diagnosed with ulcerative colitis in May 2020, during the early months of the pandemic, which was extremely hard. Since then, I've had six surgeries, tried a J-pouch, and was eventually diagnosed with Crohn's disease last year. Now, I live with a permanent ileostomy.

At the time, I was very sick and didn't feel well enough to apply. But as I started to feel a bit better, I knew I wanted to connect with peers who understood what I was going through.

I had a lot of family support, but I wasn't actively around anybody else who had IBD. So, I applied to the National Council of College Leaders, was accepted, and have been involved ever since!

Being a patient reporter for Congress means the absolute world to me. Since my diagnosis in 2020, I've already seen significant strides in research and, more importantly to me, in representation, which was definitely lacking pre-pandemic. Seeing more patients that look like me, being able to advocate for patients who look like me, is so important.



Early in my journey, I discovered the Foundation Instagram—Gen Z, we're always online.

I'm really looking forward to Congress because I am passionate



about bridging the gap between complex medical jargon and practical, day-to-day IBD treatment. I have had such a hands-on medical team and a supportive family who advocated for me to be able to do the work that I'm doing now.

Not everyone is that fortunate; that's

why I want to be a helping hand for others. It's also just exciting to find out more about IBD. It's so important to participate in ongoing discussions about IBD because there are still so many unknowns. If I can make a difference, even in a small way, I'm always ready to help. ♦

## **REACH-IBD @Congress: Innovations in IBD**



February 7, 2025  
11:45 a.m. - 1:15 p.m.

**RSVP**



**Incorporating Intestinal Ultrasound into an IBD Practice**

Noa Cleveland, MD

**Building an Innovative Clinical IBD Program**

Shrivinas Bishu, MD



# Don't Miss These Posters at Congress!

**Each year, the Crohn's & Colitis Congress® recognizes rising stars in IBD research through the Early Career Investigator Award.** For 2025, ten outstanding investigators were honored for their groundbreaking abstracts, spanning both basic science and clinical research. These awardees include medical students, residents, and postdoctoral fellows advancing our understanding of IBD from the lab bench to the bedside. In this issue, we'd like to highlight two of them.

## **Abstract: DEFINING RADIOLOGICAL HEALING IN PERIANAL FISTULISING CROHNS DISEASE A GLOBAL MODIFIED DELPHI CONSENSUS FROM THE TREATMENT OPTIMISATION AND CLASSIFICATION OF PERIANAL CROHNS DISEASE CONSORTIUM**

**Jalpa Devi, MBBS**

*IBD Fellow, Washington University in St. Louis*

As a second-year advanced IBD fellow, Dr. Devi's training integrates comprehensive patient care with

ongoing research in clinical outcomes, innovative diagnostics, and advanced therapeutic interventions for complex IBD cases. Beginning next year, Dr. Devi will transition to a faculty position at the University of Nebraska Medical Center, where she plans to establish a multidisciplinary IBD program dedicated to patient-centered care, real-world treatment efficacy research, and the use of novel imaging modalities, such as intestinal ultrasound, to enhance diagnostic accuracy.

Dr. Devi's research interests include improving healing outcomes for fistulizing Crohn's disease and advancing non-invasive assessment techniques, particularly in the management of perianal Crohn's disease.

## **Abstract: TARGETING MYD88-JAK2 SIGNALING IN ABERRANTLY DIFFERENTIATED MESENCHYMAL PROGENITORS IN ULCERATIVE COLITIS**

**Ronaldo Paolo Panganiban, MD, PhD**  
*Instructor, Penn State College of Medicine*

Dr. Panganiban recently completed his fellowship training as a

Gastroenterology and Hepatology Fellow under the ABIM Research Pathway and will transition to a faculty position as an Assistant Professor at Penn State College of Medicine in February 2025. In addition to research and clinical commitments, Dr. Panganiban will

serve as the course co-director of the GI Fellowship IBD Lecture Series.

Dr. Panganiban's research focuses on mesenchymal stromal cells and their applications in IBD. His goal is to become an independent physician-scientist. ♦



# CROHN'S & COLITIS CONGRESS®

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**REVOLUTIONIZING IBD CARE**

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# Visiting IBD Observership Program



The Visiting IBD Observership Program (VIBD) offers GI fellows the opportunity to accelerate their career development and gain practical experience by participating in the clinical operations of a specialty IBD center, with program expenses covered by the Foundation.

**Learn more and apply by 3/1**



The opportunity to train with IBD experts at a renowned institution is invaluable. Through VIBD, I was able to see the entire spectrum of IBD pathology and the realm of treatment options available for these patients firsthand. The VIBD monthly curriculum was tailored to my learning goals, including the opportunity to work with the ostomy and nutrition teams, surgeons, and the multidisciplinary clinic teams. I am already employing what I've learned into the care of my IBD patients! - **Stephanie Melquist, MD**

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