



Prof. Silvia Sookoian: knowledge on the natural history and the pathogenesis of non-alcoholic fatty liver disease has incremented exponentially

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Expert's introduction

Prof. Sookoian has a position as a physician-scientist devoted to translating scientific knowledge in Hepatology for patient care. Her current clinical and translational research is focused on genetic, epigenetic, and molecular mechanisms implicated in non-alcoholic fatty liver disease pathogenesis and disease progression. Prof. Sookoian has been published extensively in the field of Liver Disease, including non-alcoholic fatty liver disease (NAFLD) and viral hepatitis. She has been in clinical practice since 1987. She is an Editorial board member of Hepatology and GUT. She is a member of the Steering Committee Steatosis and Steatohepatitis Special Interest Group of the American Association for the Study of Liver Disease, and she serves as a member of the AASLD Latin American Regional Advisory Council.

Interview

HBSN: *What leads you to the study of NAFLD and personalized medicine?*

Prof. Sookoian: This is because NAFLD is the most frequent chronic liver disease worldwide. Then, as the disease prevalence is constantly increasing, I think that physicians and scientists need to focus on personalized treatments for patients. The disease is very complex, meaning that many factors are implicated in its development. Thus, we need to understand the risk predisposing factors in each patient in particular and do specific cures for them.

HBSN: *What do you think of the prospects for this field?*

Prof. Sookoian: I think that this field has gained knowledge, however not enough to understand the disease completely. Fortunately, in the next coming years,

knowledge on the natural history of the disease as well as its pathogenesis will be huge. Because hepatitis is being controlled, new anti-virus treatment has been discovered and being used. So patients with hepatitis are going to be free of this disease in the next years. Then NAFLD is going to be the leading cause of liver disease.

HBSN: *We mentioned personalized medicine just now, and what benefits do you think personalized medicine will bring to human beings?*

Prof. Sookoian: This is a wonderful question. This is because if you apply personalized treatment, you are going to be successful with each particular patient. This is due to the disease course and prognosis varies significantly among patients with NAFLD; so you need a personalized treatment to get control on this disease.

HBSN: *Do you have any plans for your future?*

Prof. Sookoian: Oh, the future will challenge our way of thinking. Put this differently; our future is looking at our patients. Patients are our worries. So, we need to worry that they have our absolute attention.

HBSN: *When did you know HBSN for the first time?*

Prof. Sookoian: We, my colleague Dr. Pirola and me, were invited to write an Editorial for *HBSN*. That was when I knew the journal for the first time. Then, I was invited to attend the University of Chicago in Beijing meeting. That was wonderful.

HBSN: *And do you have any expectations for HBSN?*

Prof. Sookoian: I think that *HBSN* will increase its impact factor in the near future. Because many of the journal

readers' believe so. Besides, many experts and scientists around the world know this journal and want to write and submit articles to *HBSN*. The future is really promising.

HBSN: *Have you had any contact with Dr. Mao? What do you think of him?*

Prof. Sookoian: He is a wonderful person and devotes himself to the cause of human beings.

HBSN: *What do you think of the journal launched in Chinese?*

Prof. Sookoian: I think it is a good idea. Many journals indeed are published in two languages, one in Chinese and one in English. So, if you can capture the English readers, the impact factor will increase. But if you have all versions in Chinese, many people who don't speak English can't read

it. So, it is a good idea to have double versions.

Acknowledgments

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Footnote

Conflicts of Interest: The author has no conflicts of interest to declare.

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