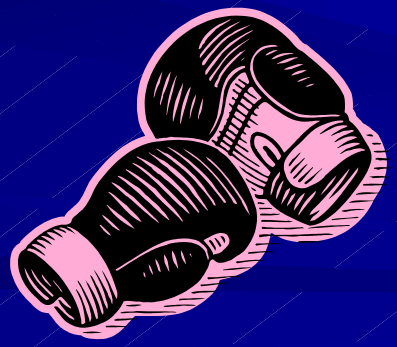
DISCLAIMER

No Conflict of Interest

EXCLAIMER

No Interest in Conflict



GORD
IS
SURGICAL

John Dunn, FRACS
Laparoscopy Auckland

PATHOGENESIS

Failure of lower oesophageal sphincter ± hiatus herniation

IT'S NOT ROCKET SCIENCE


RESCUE

COMPLICATIONS (1)

- oesophagitis
- stricture
- Barrett's/cancer
- respiratory

COMPLICATIONS (2)

- chronic cough
- voice change
- aggravation of asthma
- recurrent bronchitis
- recurrent pneumonia
- ? bronchiectasis

SYMPTOMS (1)

- rising retrosternal burning
- waterbrash
- dysphagia ALARM!
- vomiting
- regurgitation

SYMPTOMS (2)

- supine
- wake
- nocturnal cough
- gardening
- tying shoes
- sex

SYMPTOMS (3)
NOT

- severe
- epigastric
- paroxysmal

SYMPTOMS (4)

- beware middle aged males
  - no burning
  - may have Barrett's
- beware teens
  - vomiting predominant
  - sports field

INVESTIGATION (1)

Gastroscopy

- status of mucosa
  - oesophagitis
  - Barrett's
- size/type of hernia
- status of sphincter
- status of hiatus
- stomach/duodenum
- biopsies

SOMETIMES IT'S NORMAL

INVESTIGATION (2)

Barrett's

- long segment > 4 cm
- biopsy 2 – 3 yearly
- ?dysplasia
- high grade → 50% Ca
- HALO
- oesophagectomy
- 1000-100-4 (saved)

INVESTIGATION (3)

Barium Meal

- dynamic
- low tech
- accurate
- no good for motility

INVESTIGATION (4)

24 hour pH test

- uncomfortable
- under/over reads
- high tech
- expensive

INVESTIGATION (5)

Manometry

- dysphagia
- rule out achalasia
- selective
- high tech
- expensive

INVESTIGATION (6)

Differential

- ultrasound
- CXR
- (PPI)

DIFFERENTIAL (1)

GI

- GU/DU
- gallstones
- dysmotility
- achalasia
- coeliac disease
- gastric outlet obstruction

DIFFERENTIAL (2)

non-GI

- MI
- sinusitis
- URTI/LRTI
- psychogenic
- raised ICP

TREATMENT (1)

Lifestyle

- raise head of bed
- kneel – don’t stoop
- caffeine, alcohol, nicotine
- foods (idiosyncratic)
- lose weight
- don’t eat late

TREATMENT (2)

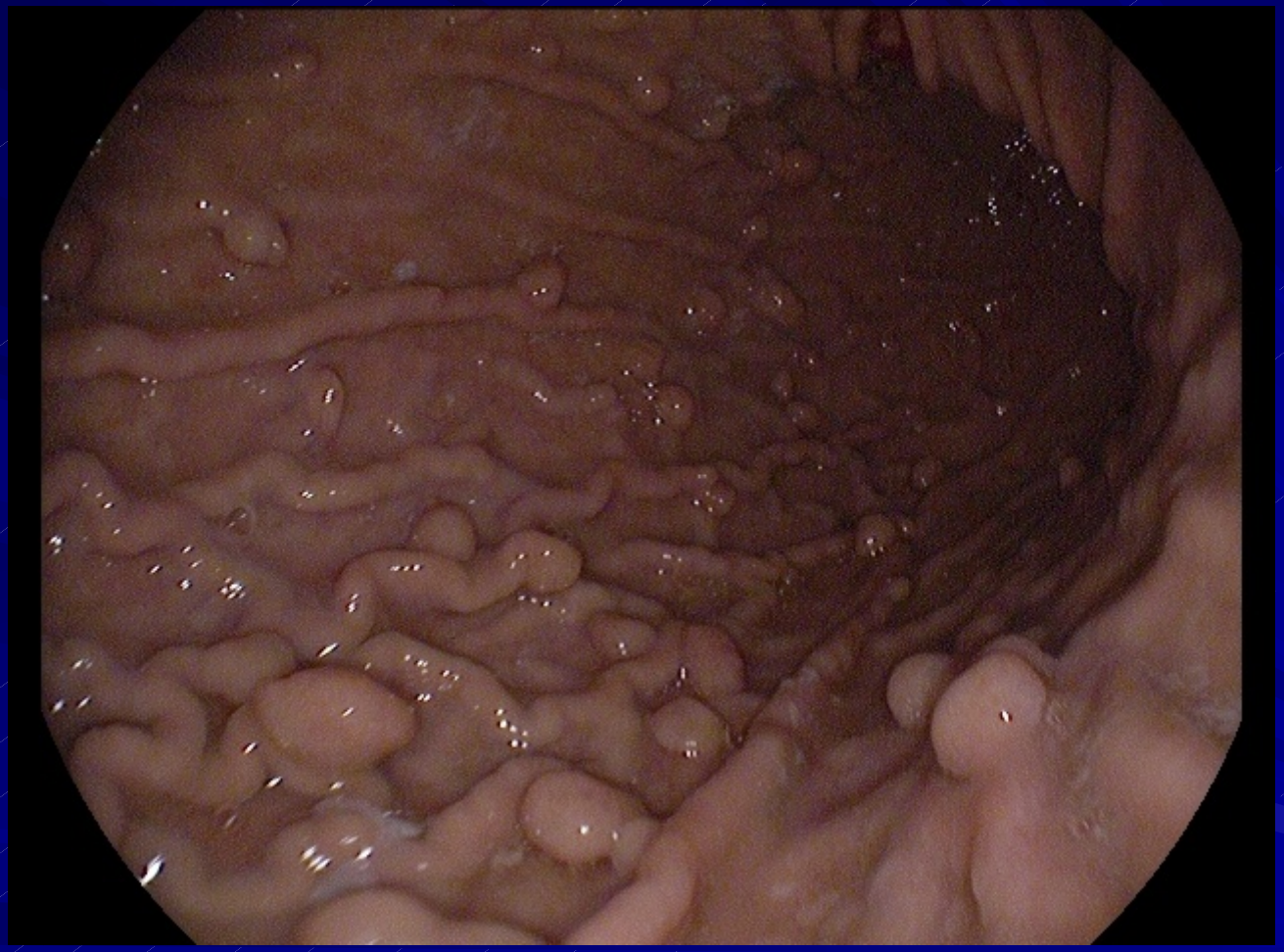
Medical

- antacids
- H_2RAs
- PPIs
- prokinetics (waste of time)
- dilate strictures

TREATMENT (3)

PPIs

- 25 years
- virtual achlorhydria
- subtle side effects
- lethargy, clouding (hypo Mg^{2+})
- myalgia (proximal)
- diarrhoea
- renal failure
- multiple gastric polyps



THE JURY IS OUT

- IT’S A HUGE OPERATION

- IT DOESN’T WORK

BOLLOCKS

TREATMENT (4)

Surgical

- Drugs don’t work (volume)
- Don’t want drugs

TREATMENT (5)

Fundoplication

- Nissen 360°
- Toupet 270°
- Anterior 180°

TREATMENT (6)

Results 20 yrs (NZ 1993)

- n > 1000
- 96% good/excellent
- serious morbidity 3 (nil 17 years)
- mortality 0
- conversions 2 (nil 18 years)

TREATMENT (7)

Pros/Cons

- early satiety
- dysphagia
- flatus
- belch/vomit

IT'S A TRADE

TREATMENT (8)

Recovery

- theatre 1 hour
- hospital 1 night
- work 1 week

TREATMENT (9)

Risks

- oesophagus
- stomach
- spleen
- chest
- aspiration
- slip

TREATMENT (10)

There is a big difference
between a
good fundoplication
and a
bad fundoplication

TREATMENT (11)

Redo

- 4-5%
- too tight
- too loose
- it’s possible

PARA-OESOPHAGEAL HERNIAS

- “rolling” hernias
- can be huge
- older patients
- atypical chest pain
- post prandial
- may not reflux
- respiratory compromise
- catastrophic torsion
- CXR diagnosis
- more complex surgery

FIX THEM!

TAKE HOME (1)

- vastly under-treated
- a mechanical problem
- medical treatment simple
- consider surgery

TAKE HOME (2)

- beware males (volume)
- beware the young (vomiting)
- beware the old (para-oesophageal)
- beware chest pain
- beware no burning
- beware respiratory patients
- beware cancer
- beware PPIs next decade

TAKE HOME (3)

- gastroscopy mandatory
- keep it simple
- 360° fundoplication best
- choose your surgeon!

0800 SURGEON