Gastro-esophageal Reflux after Laparoscopic Heller's Cardio-myotomy and Anti-reflux Procedure in Achalasia Cardia: Subjective And Objective Evaluation

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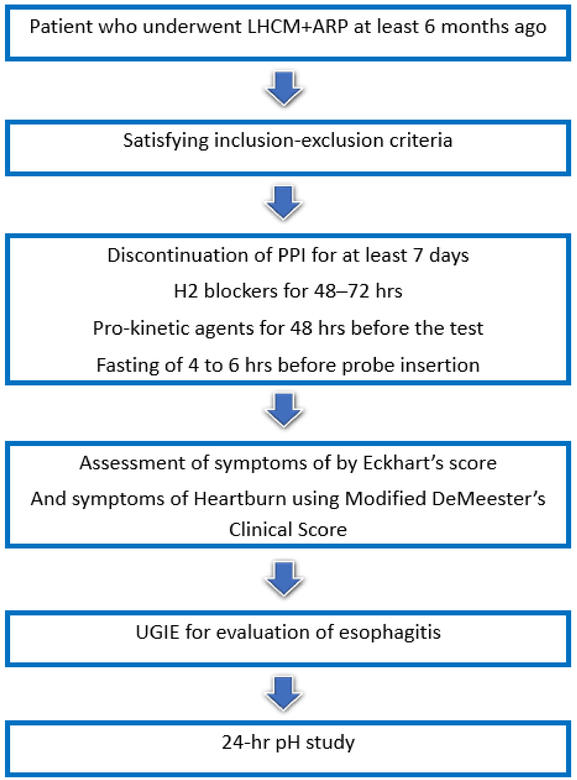
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INTRO:

- Achalasia treatments disrupt LES, relieving dysphagia but raise GER concerns.
- Study evaluated LHCM with ARP's GER prevalence, correlating symptoms with objective findings

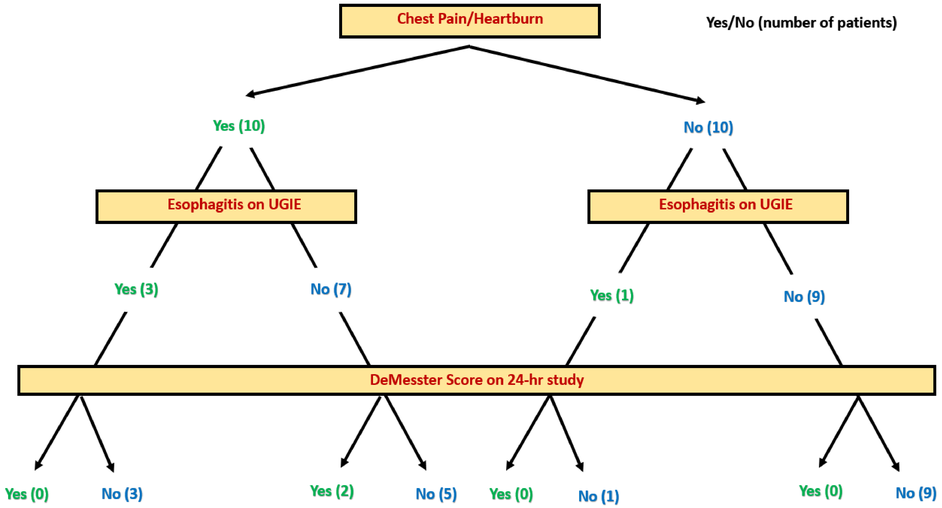
METHODS:



Consort diagram of the study

Mismatch Found: Achalasia Cardia Patients Show Varied findings **in Gastro-esophageal Reflux assessments by 24 hr pH study ,**UGI **Endoscopy** and reported **Symptoms !**

RESULTS:



DISCUSSION:

- Pathological GER post LHCM with ARP at 10%, aligning with existing studies.[1]
- Discordance noted between pH study, esophagitis, symptoms; comprehensive evaluation crucial.

CONCLUSION:

- Study underscore importance of routine evaluation for GER, even in asymptomatic patients for improving post-operative outcomes in achalasia management

REFERENCE:

1. Campos GM, Vittinghoff E, Rabl C, Takata M, Gadenstätter M, Lin F, et al. Endoscopic and surgical treatments for achalasia: a systematic review and meta-analysis. Ann Surg. 2009 Jan;249(1):45–57