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The GERD-X procedure personal casuistry and clinical outcomes

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Introduction: The GERD-X procedure is a further development of the NDO-Plicator-system consisting of a flexible endoscope-like tube and a playstation-like operating console. In the front of the tube the needles and pretied sutures are hold in a closed snake- or crocodile-like mouth. The procedure is performed under direct vision of a retroflexed baby scope, which is passed through the inserted tube in a patient under general anaesthesia in normal back position. Once in appropriate position at the left side of the GE-junction the arms of the device are closed, deploying the implant which is made of pretied sutures and PTFE-blades. Subsequently after realizing this first step, the device is removed, leaving a full thickness permanent suture plication of the gastric wall. This procedure is reproducible until the GE-junction is tight and shows a fundoplication-like gastroesophageal valve Hill Grade I.

Aim: Aim of this presentation is to present a series of 120 patients assigned to the GERD-X procedure. In all those patients, a meticulous preoperative examination was performed, including endoscopic examination, cinematographic esophageal barium X-ray-studies, high resolution manometry, impedance pH-monitoring and quality of life score studies using the gastrointestinal quality of life-score according to Eypasch and Troidl. Exclusion criteria for performing the GERD-X-procedure in this series were defined as hiatal hernias more than 1 centimeter detected in high resolution manometry and/or a gastroesophageal valve more than Hill Grade II.

Considerations: According to a detailed follow-up and analysis of our patients, the focus for achieving good results has to be put on the exclusion criteria of a Hiatal hernia or gastroesophageal valve more than Hill Grade II and a sophisticated handling of the GERD-X device. Meeting these presumptions excellent results corresponding to the GIQLI-score can be achieved, although the number of reflux episodes decreases only to the middle compared to a decrease of about 90% after a Nissen procedure.

Conclusion: The special merits of the GERD-X procedure are a high rate of patient satisfaction according to the GIQLI scores without producing complications or side effects as they are known after laparoscopic fundoplication.

Biography

Rudolph Pointner is currently working at Tauernklinikum Zell am See, Austria. He has published research papers and articles in reputed journals and has various other achievements in the related studies. He has extended his valuable service towards the scientific community with his extensive research work.

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