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Balloon dilatation in patients with gastric outlet obstruction related to peptic ulcer disease

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Gastric Outlet Obstruction (GOO) related to Peptic Ulcer Disease (PUD) is a rare complication which has traditionally been treated by surgery. Endoscopic Balloon Dilatation (EBD) has been shown to be an effective and safe procedure, particularly in elderly patients and/or patients at high risk of surgery. The aim of the study was to describe epidemiological, clinical and endoscopic characteristics of GOO secondary to PUD and to evaluate the effectiveness, safety and outcome of EBD. Between 1999 and 2009, 45 patients consisting of 38 male, 7 female with a median age 51.9 years (range 20-85 years) underwent balloon dilatation; after persistence of pylorobulbar stenosis despite medical treatment with proton-pump inhibitor intravenously for 7-10 days. Symptomatic relief was obtained immediately in 95.5% with clinical remission in 84.4% of patients. The procedure was complicated in 3 patients (6.7%, two perforations and one case of bleeding). *Helicobacter Pylori* (*H. pylori*) was found in 97.7% of patients and eradication therapy was prescribed. The median follow-up was for 32 months (range between 4-126 months). Remission without relapse was observed in 55.8% of cases, 30 months after dilatation and *H. pylori* was eradicated in 78.8% of observed cases. Stenosis relapsed in 15 patients (39.5%) after a median period of 22.9 months. Smoking and failure of *H. pylori* eradication were associated with relapse of stenosis. Hence, the study showed that EBD was an effective and safe therapeutic method for GOO related to PUD with short and long term remission.

Biography

Lamine Hamzaoui is an Assistant Professor in Gastroenterology department of the University Hospital Mohamed Taher Maamouri (Nabeul, Tunisia). He is also a Teacher in Faculty of Medicine of Tunis (University of Tunis-El Manar, Tunisia). He has published many papers in the field of Gastroenterology and Hepatology.

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