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9th Euro Global Gastroenterology Conference

October 24-25, 2016 Valencia, Spain



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Gastroesophageal Reflux Disease in the Older Patient

Gastroesophageal reflux disease (GERD) is the most common upper gastrointestinal disorder seen in the older patient. Although older patients with GERD may have fewer symptoms, they can have more severe esophageal and extra esophageal complications that may be potentially life threatening. These complications include the esophageal complications of erosive esophagitis, esophageal stricture, Barrett's esophagus, adenocarcinoma of the esophagus and the extra esophageal complications of atypical chest pain, ENT manifestations such as globus sensation and laryngitis, dental problems and pulmonary problems such as chronic cough, asthma, and pulmonary aspiration. A more aggressive approach may often be warranted in the older patient, because of the higher incidence of severe complications. The evaluation and management of GERD are generally the same in both younger and older patients. However, there are specific issues of causation, evaluation and treatment that must be addressed when dealing with the older patient, such as cognitive impairment, comorbidities and medication side effects.

Biography

Maxwell M. Chait completed his MD degree from the University of California School of Medicine at San Francisco. He is a Fellow of several prestigious organizations, including the American College of Physicians, American College of Gastroenterology, American Gastroenterological Association and the American Society for Gastrointestinal Endoscopy. He is a practicing gastroenterologist and assistant professor of medicine Columbia University College of Physicians and Surgeons in New York City He has authored numerous publications in reputed journals. He is the editor-in-chief of the Journal of Liver Disease and Transplantation and serves on the editorial board of several journals.

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