ενδοσκοπική θεραπεία της ΓΟΠΝ

Γεράσιμος Στεφανίδης

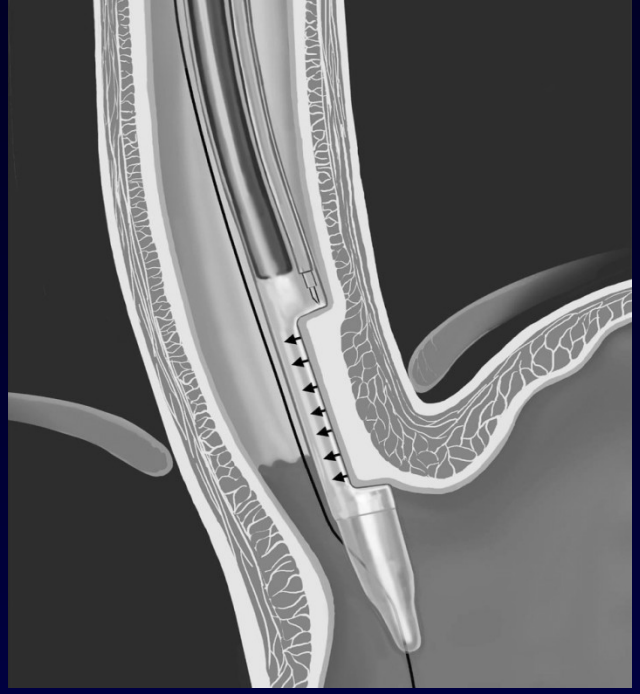
Διευθυντής Γαστρεντερολογικής Κλινικής Ν.Ν.Α

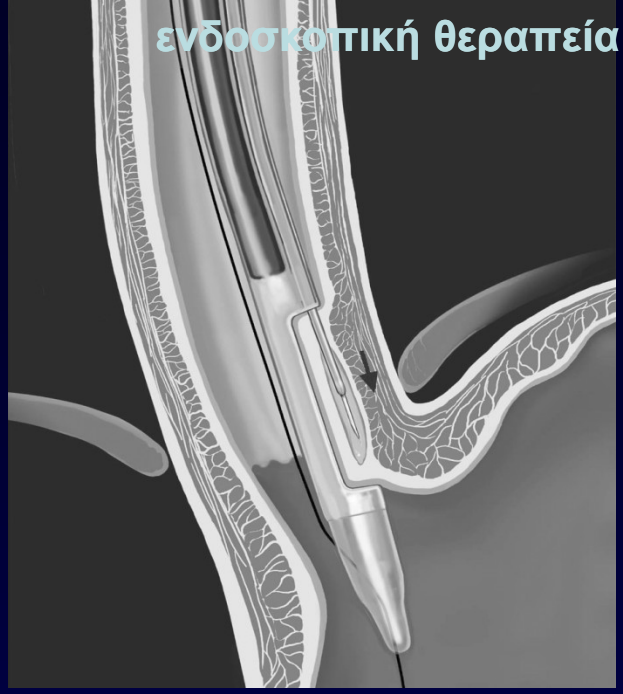
9η Εκπαιδευτική διημερίδα ΕΠΕΓΕ, Αθήνα 24-25 Σεπτεμβρίου 2011

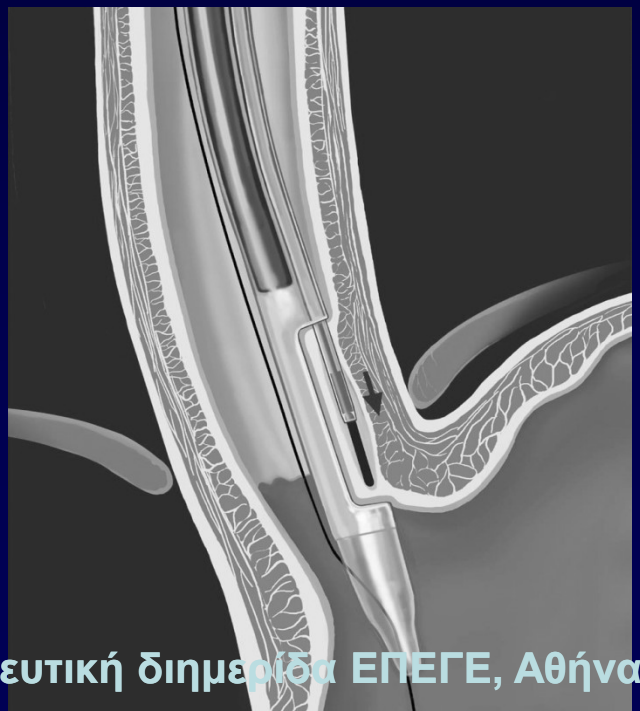
ποιες τεχνικές ενδοσκοπικής θεραπείας υπάρχουν;

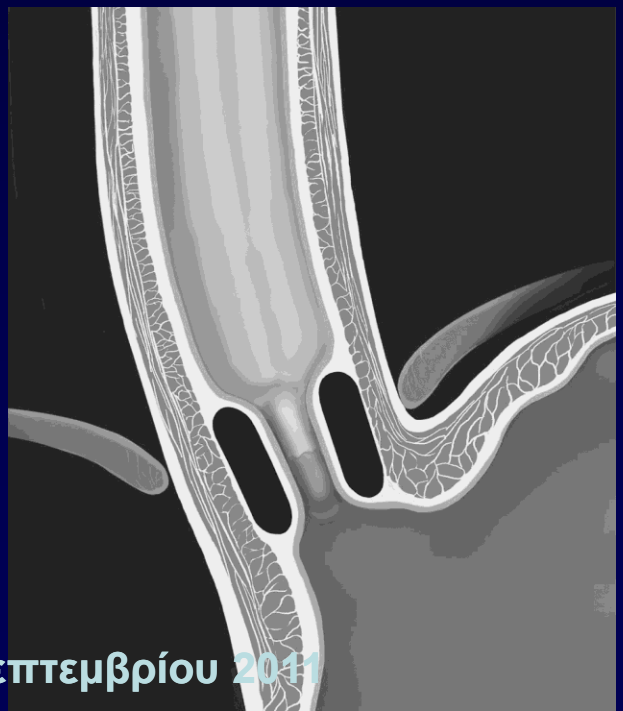
στόχοι ενδοσκοπικής θεραπείας της ΓΟΠΝ

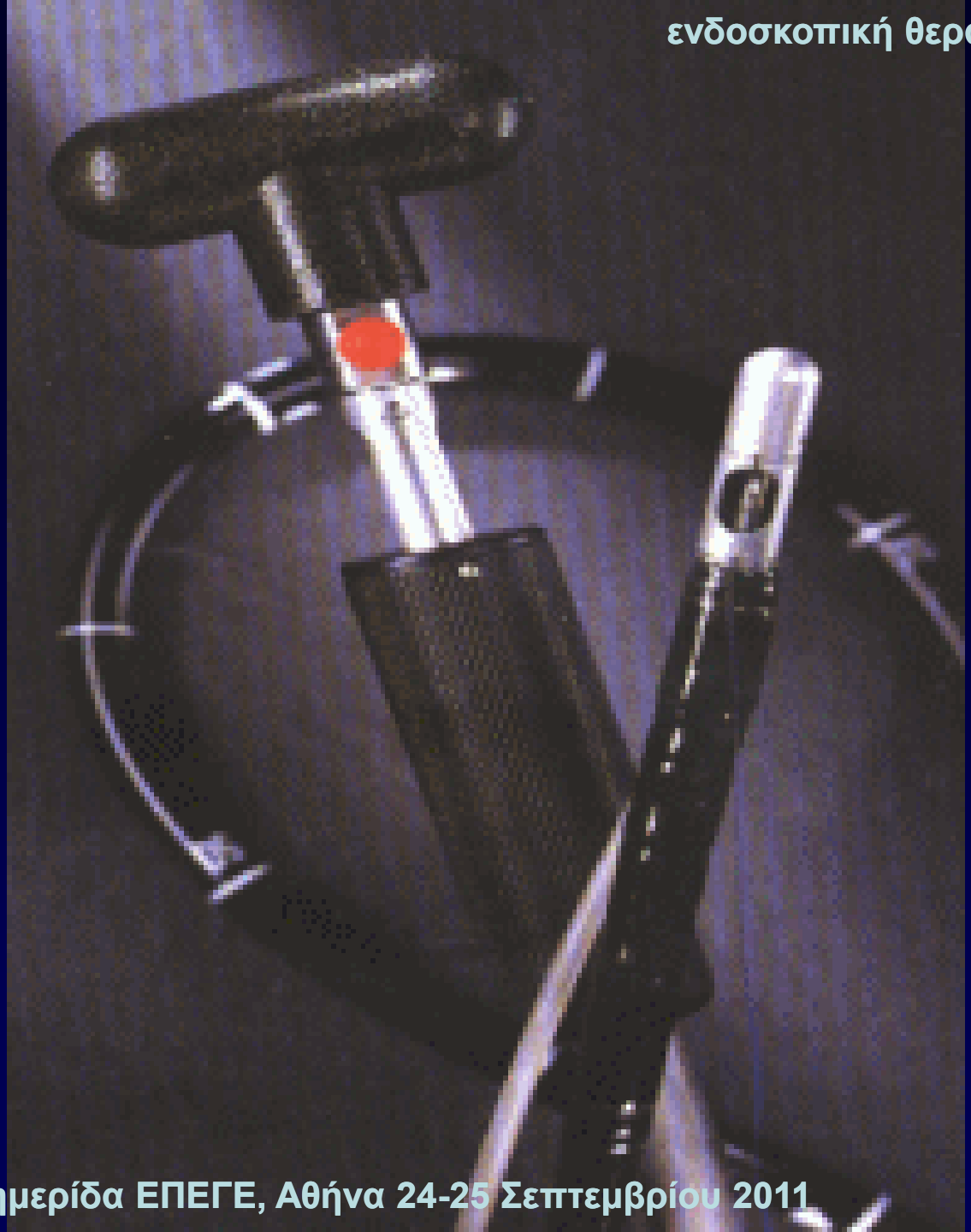
- αύξηση της πίεσης του ΚΟΣ
- αύξηση του μήκους της ζώνης πίεσης στη ΓΟΣ
- μείωση της διάτασης της καρδιακής μοίρας μεταγευματικά
- αποκατάσταση της οξείας γωνίας του Hiss



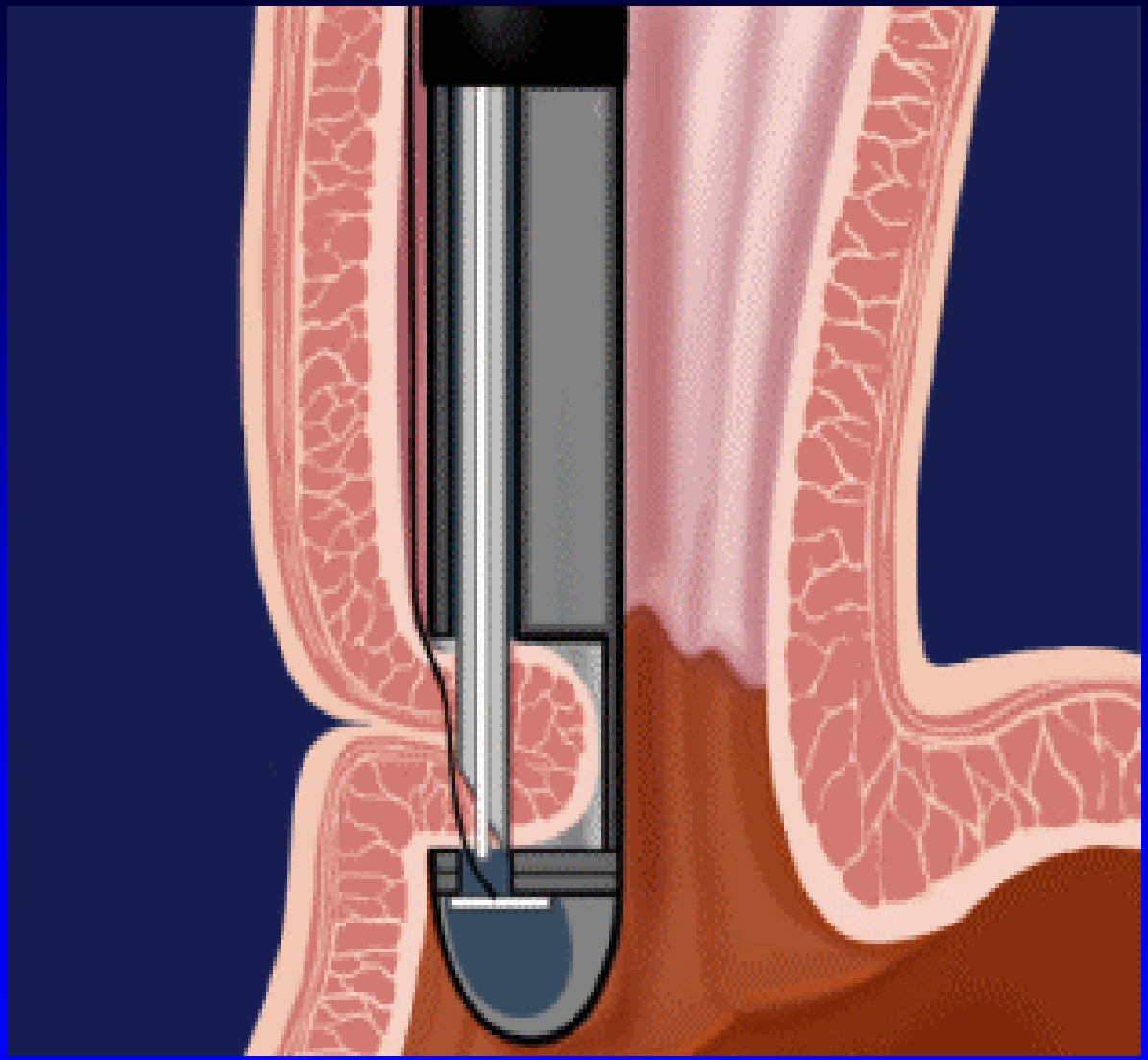


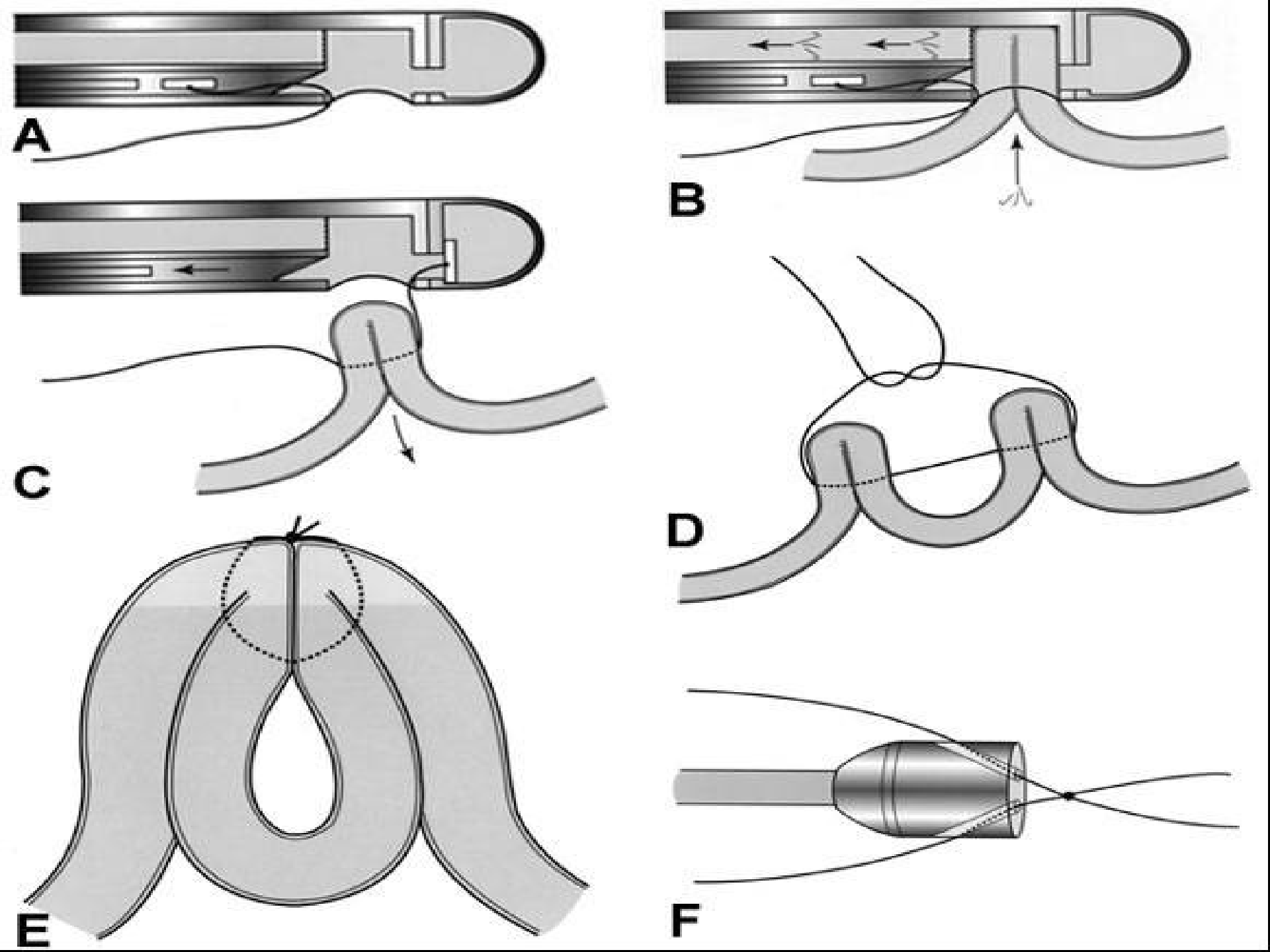


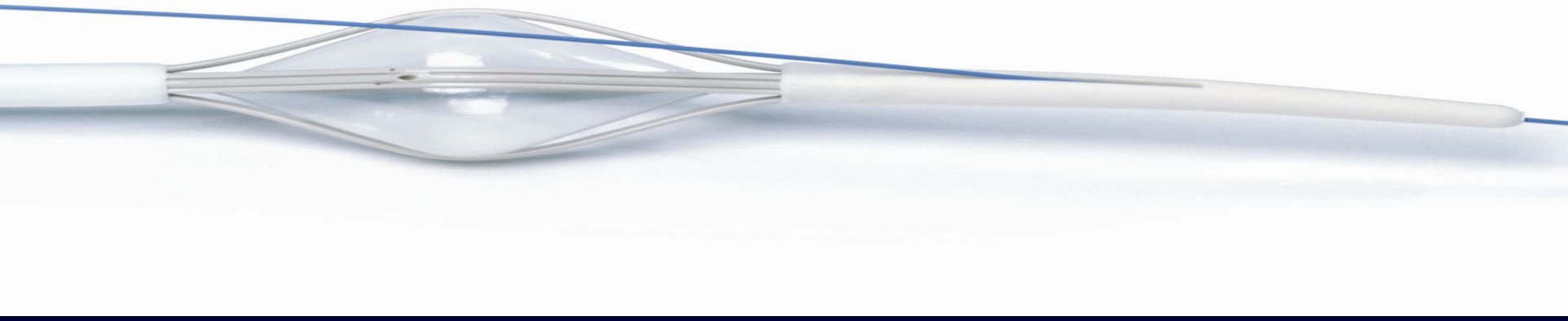


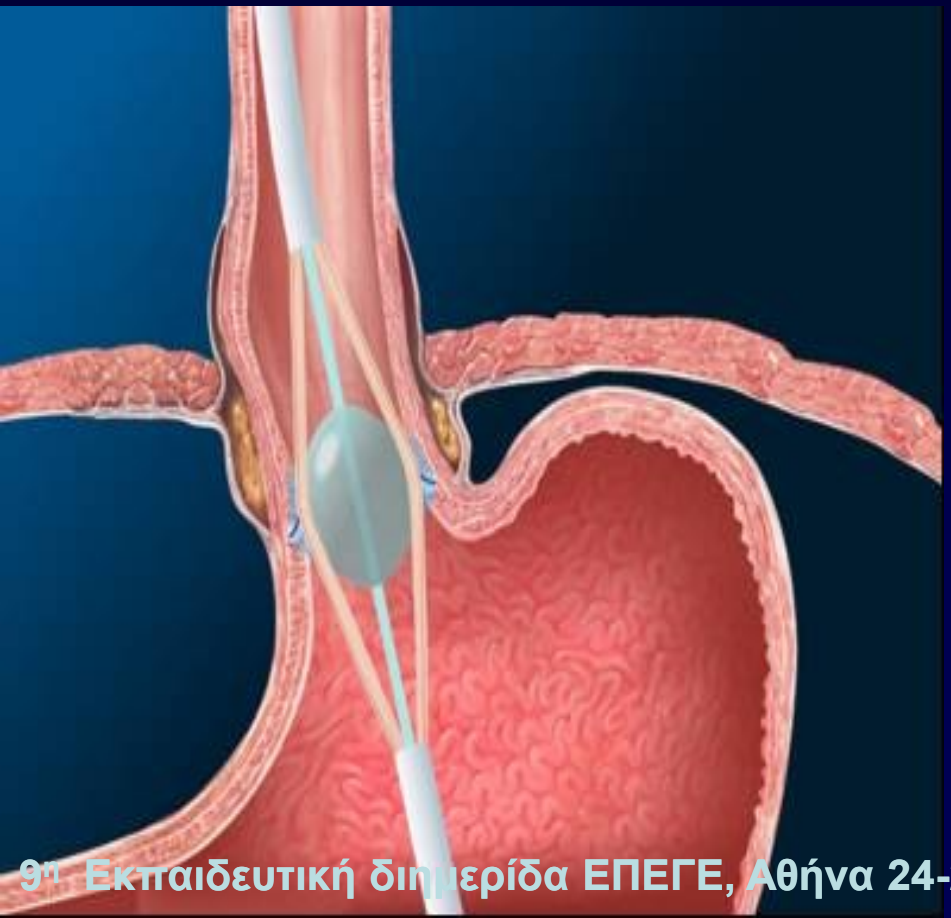


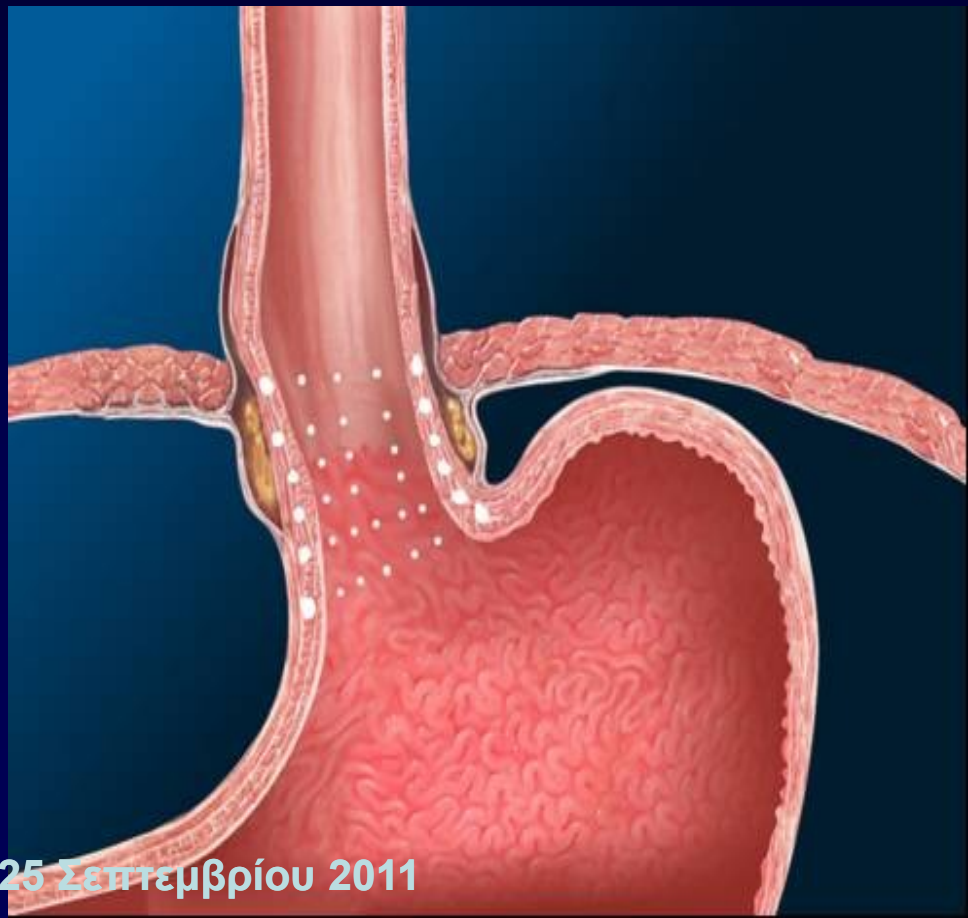
Τοποθέτηση ράμματος διά της βελόνης



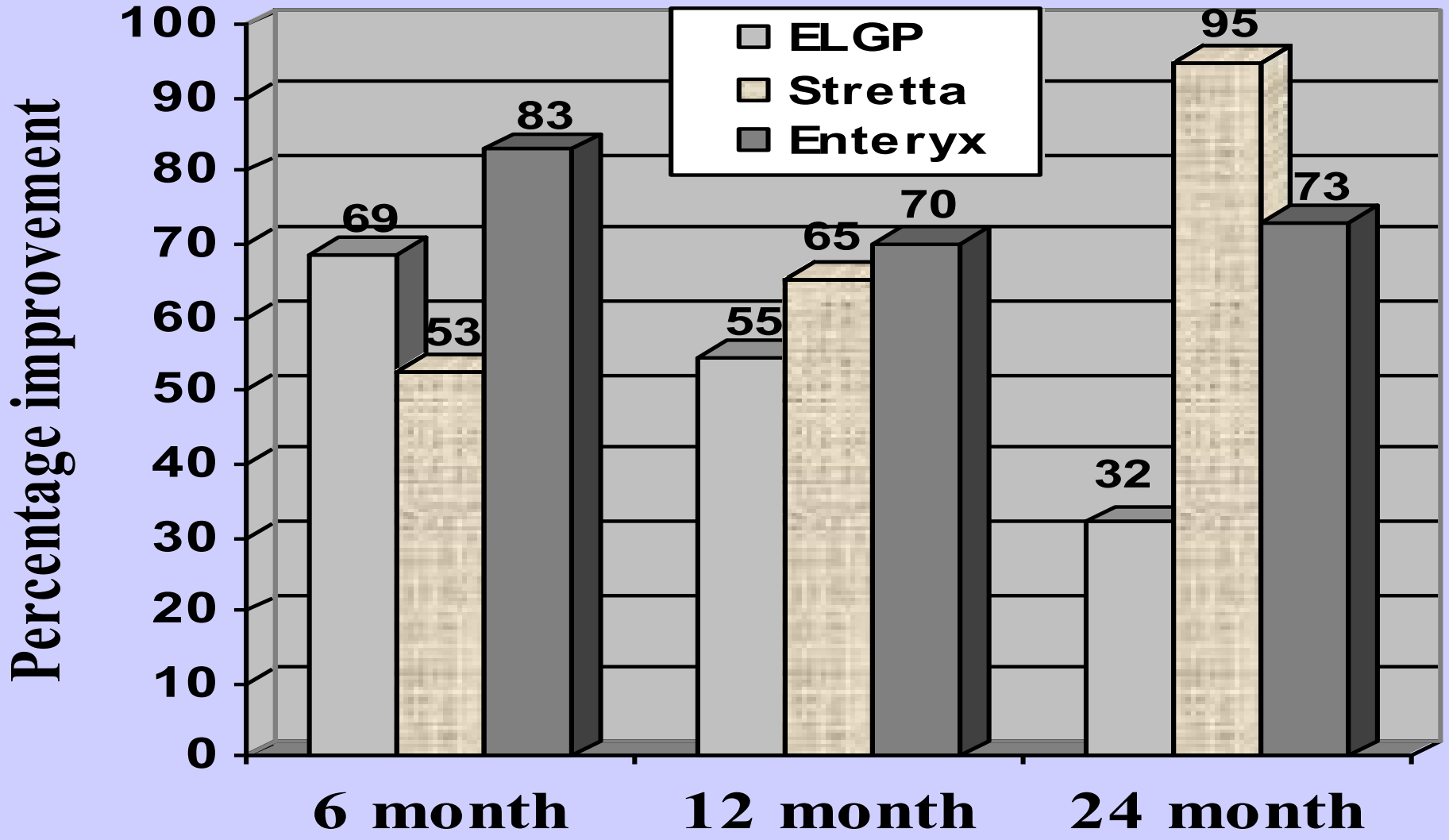

A
B
C
D
E
F



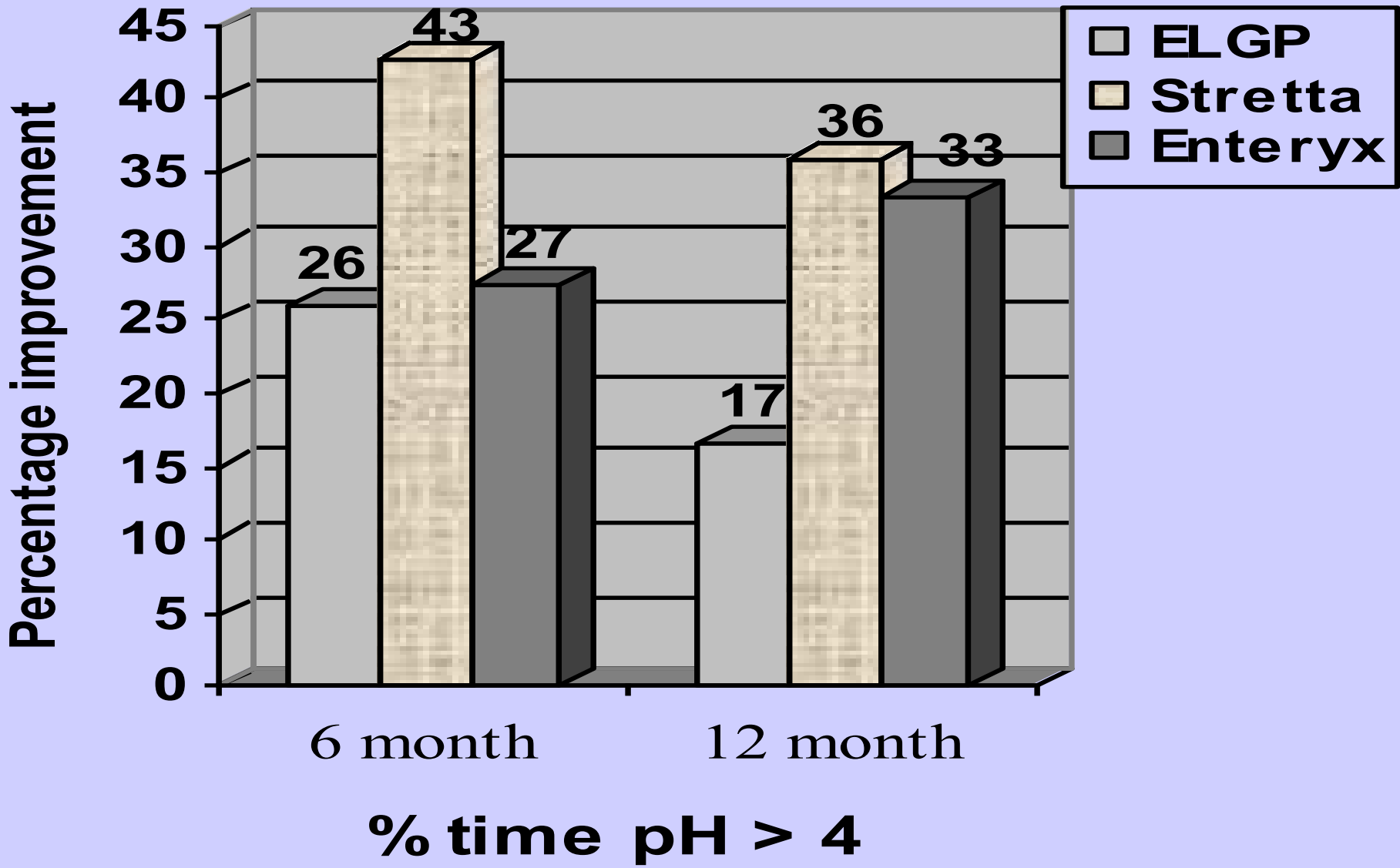


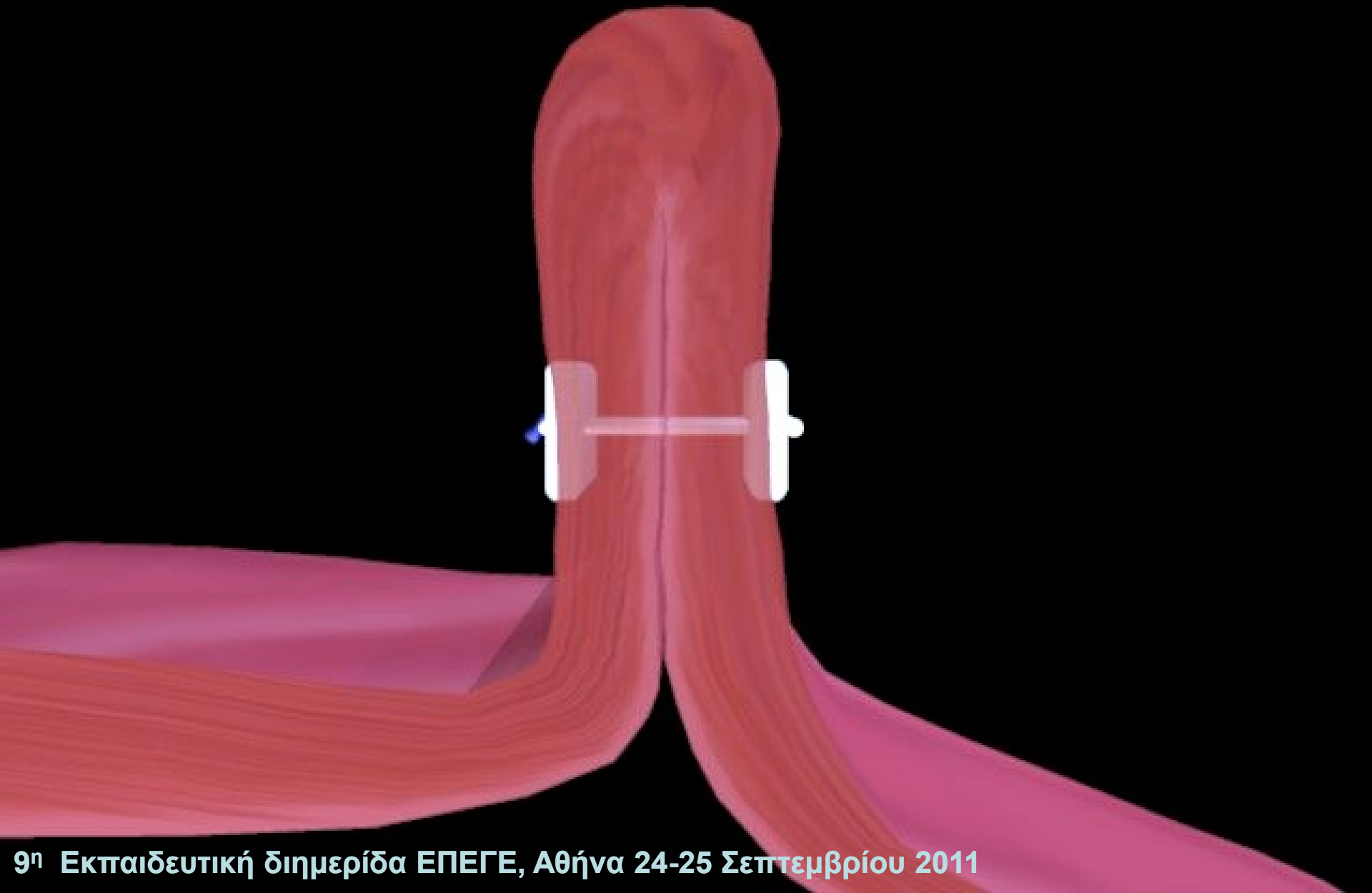


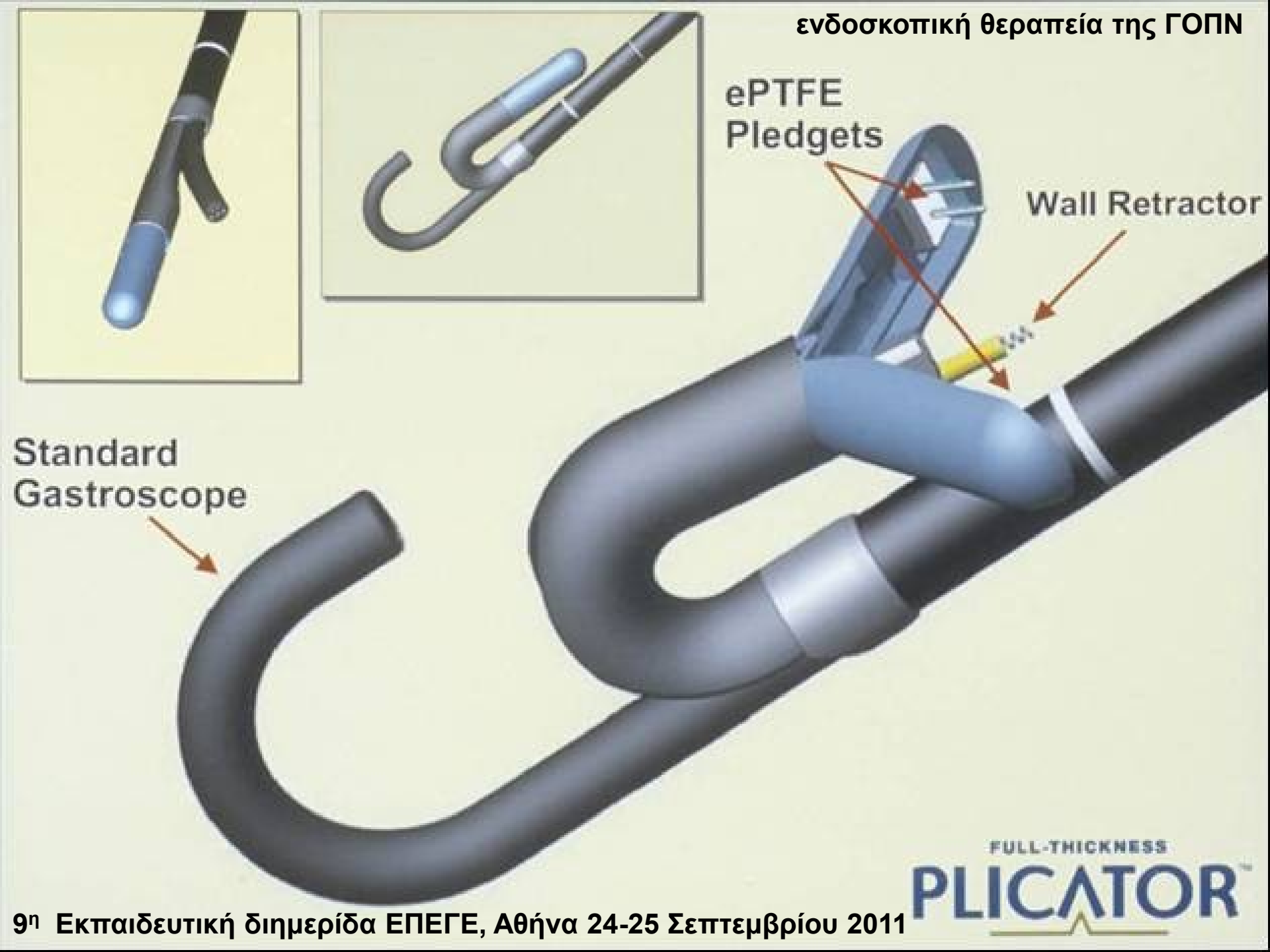
Symptom index



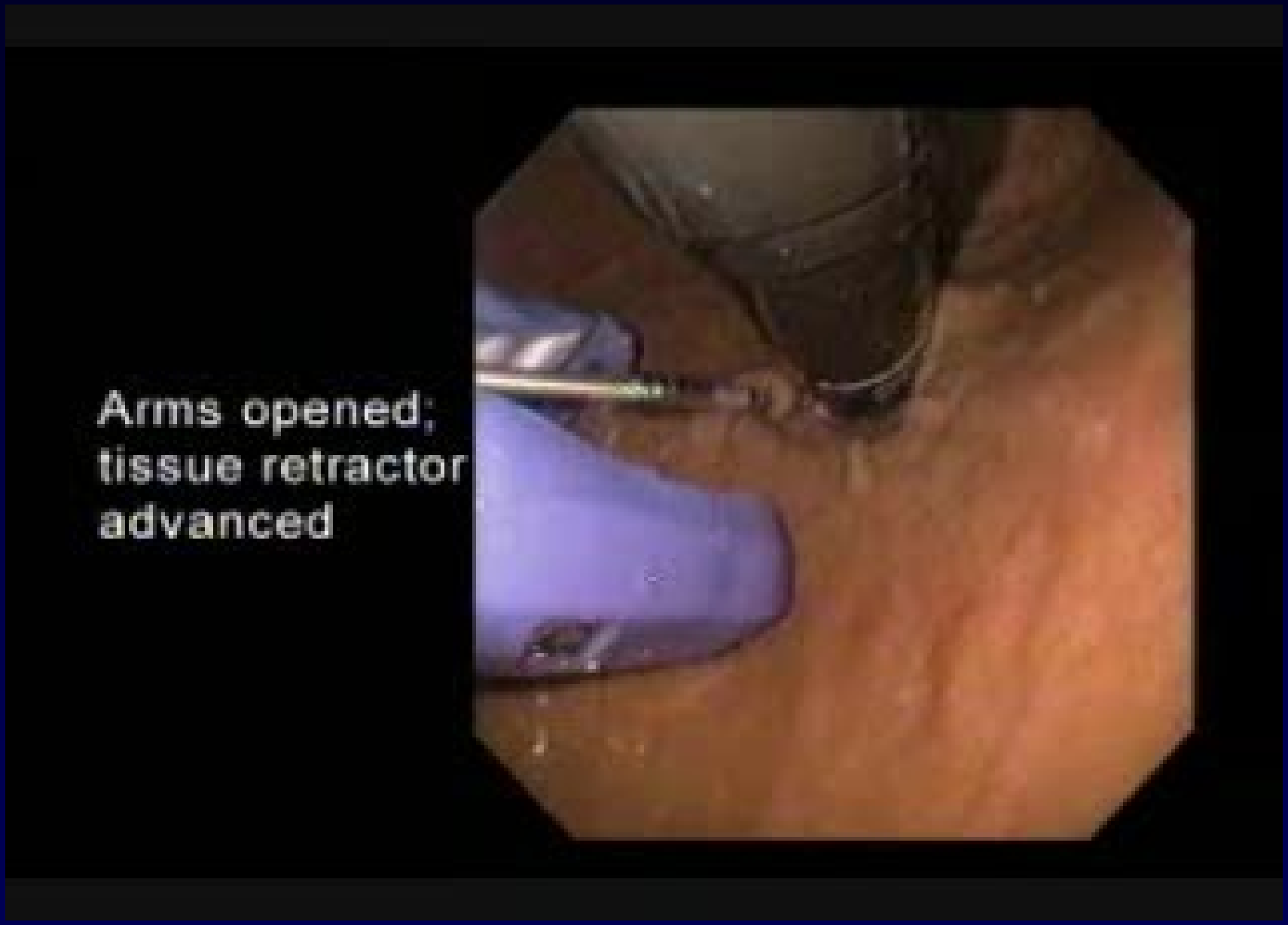
pHmetry improvement

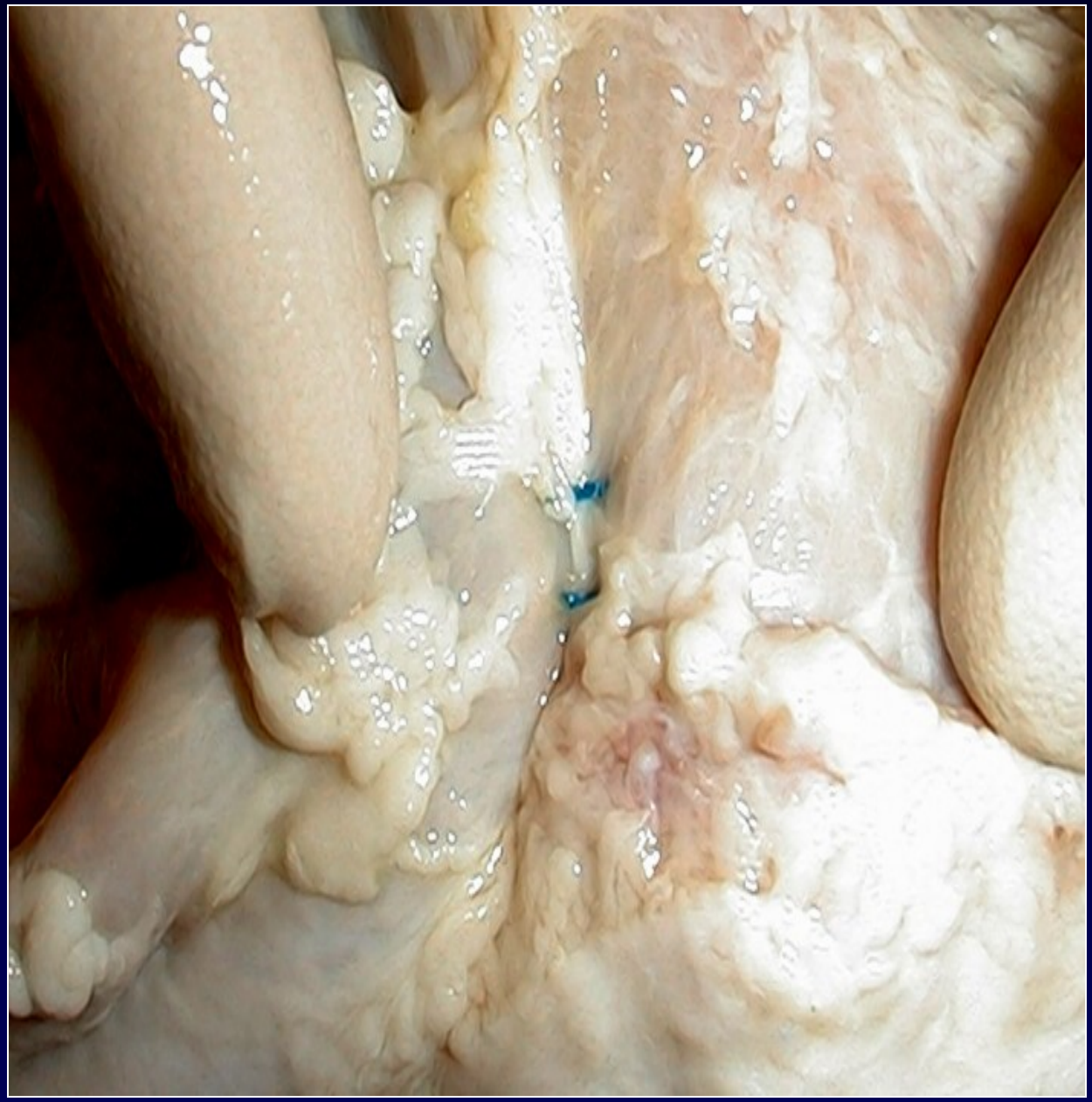





ePTFE
Pledgets
Wall Retractor
Standard
Gastroscope
FULL-THICKNESS
PLICATOR


20


Arms opened;
tissue retractor
advanced



ndo-plicator safety and feasibility
-a pilot study-

- 5 of the 6 patients improved significantly the pH-metry score and the symptom index
- 1 of the 6 patients that did not benefit, underwent laparoscopic Nissen with excellent outcome
- 3 of the 5 patients discontinued PPIs completely

Chuttani et al. GI Endoscopy 2003; 58(5):770-6

ndo-plicator
12 months follow-up

- 80% improved significantly the pH-metry score
- 1/3 had a normal pH-metry
- 70% discontinued PPIs completely

Pleskow et al. GI Endoscopy 2005; 61:643-9

ndo-plicator 36 months follow-up !

- HRQL 59 → 55%
- 60% off PPIs

Pleskow et al. *Surg Endosc 2007; 21(3):439-44*

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ndo-plicator 5 years follow-up !!

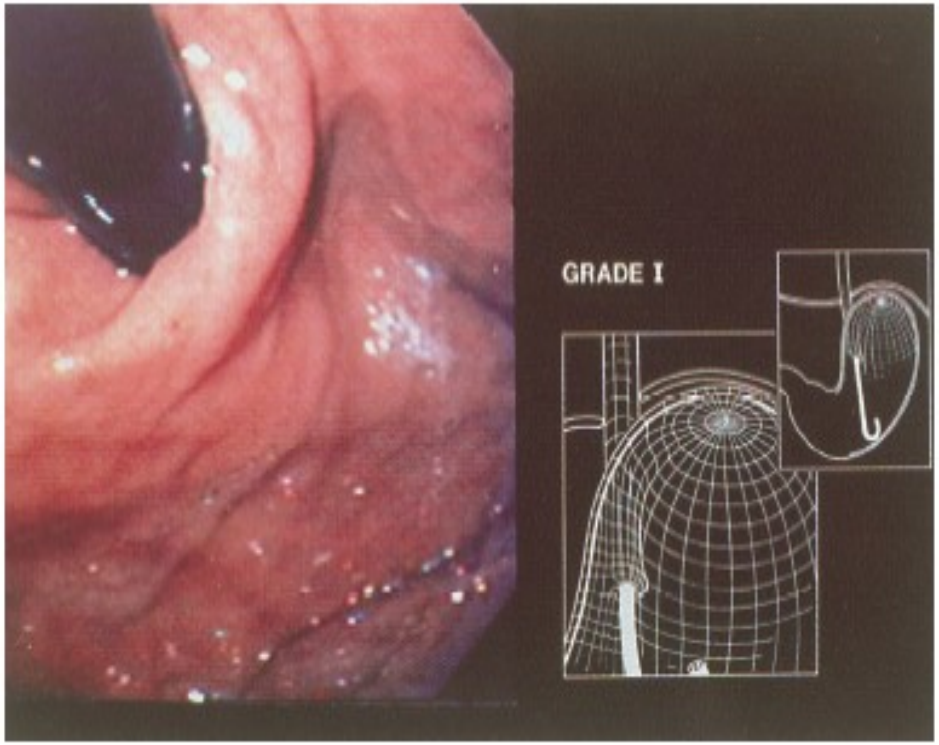
Pleskow et al. Surg Endosc 2008; 22:326–332

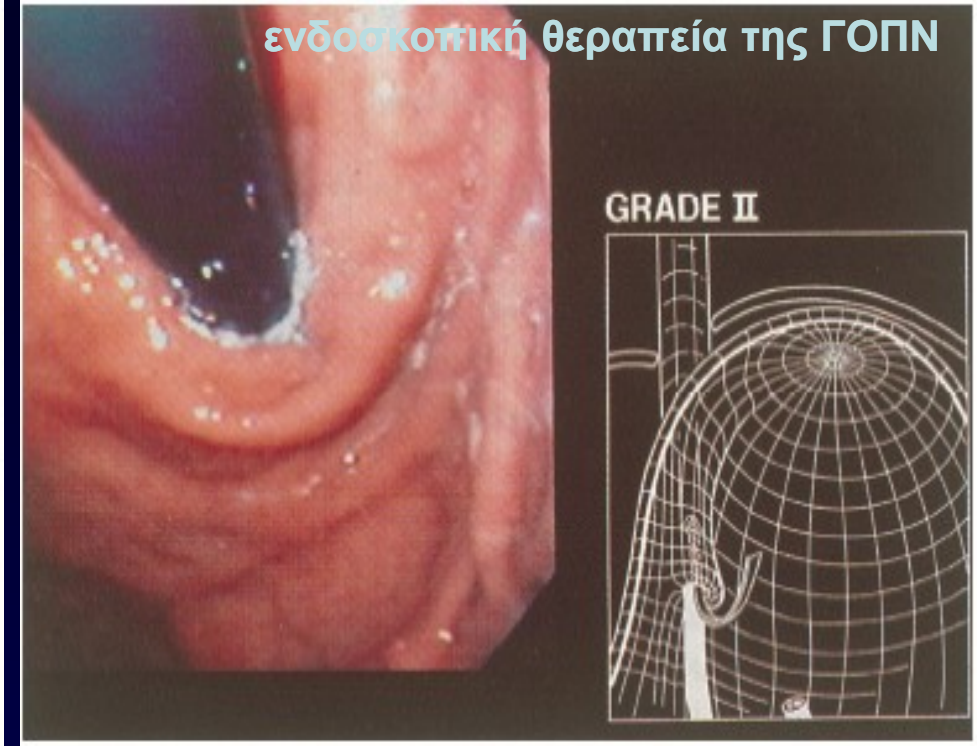
ndo-plicator
randomized, sham-controlled trial

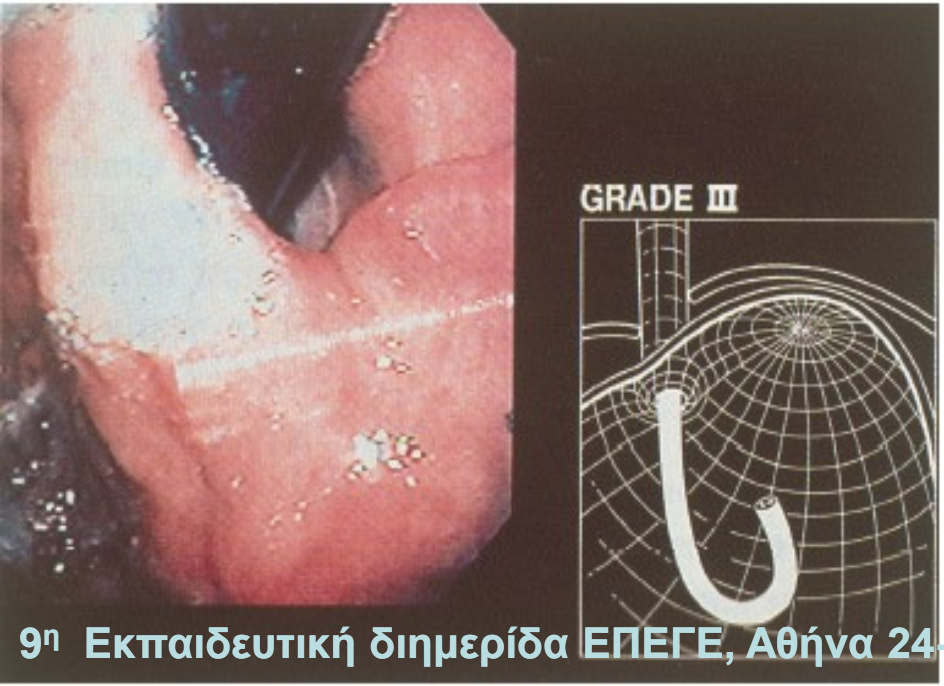
The full thickness fundoplication compared with placebo, reduces more effectively

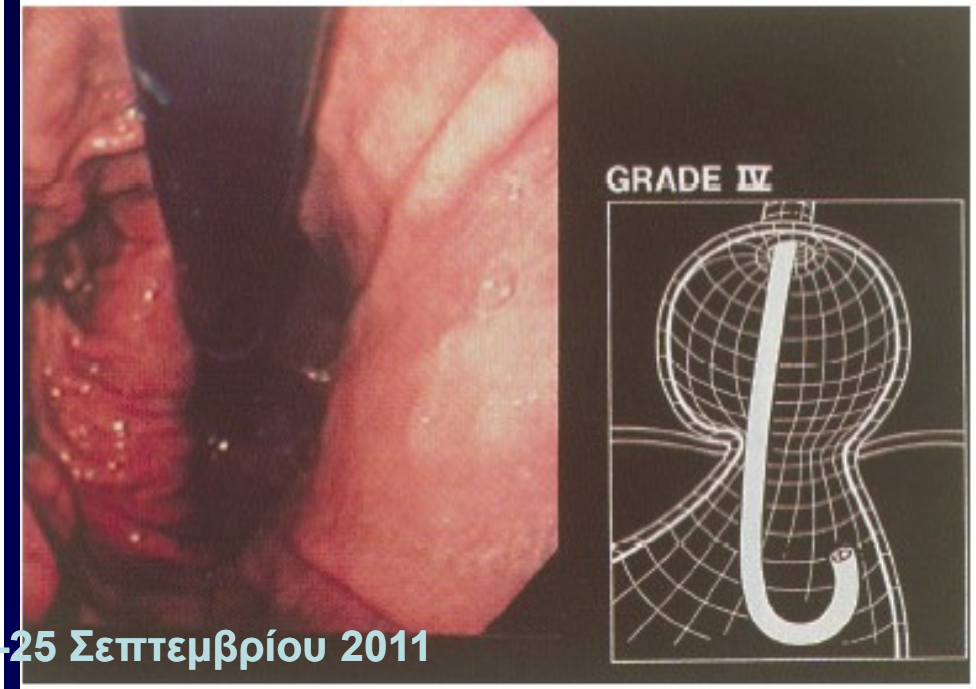
- **GERD symptoms**
- **frequency of PPI use**
- **esophageal exposure to acid (pH < 4)**

Rothstein et al. Gastroenterology 2006; 131:704-712


GRADE I


GRADE II

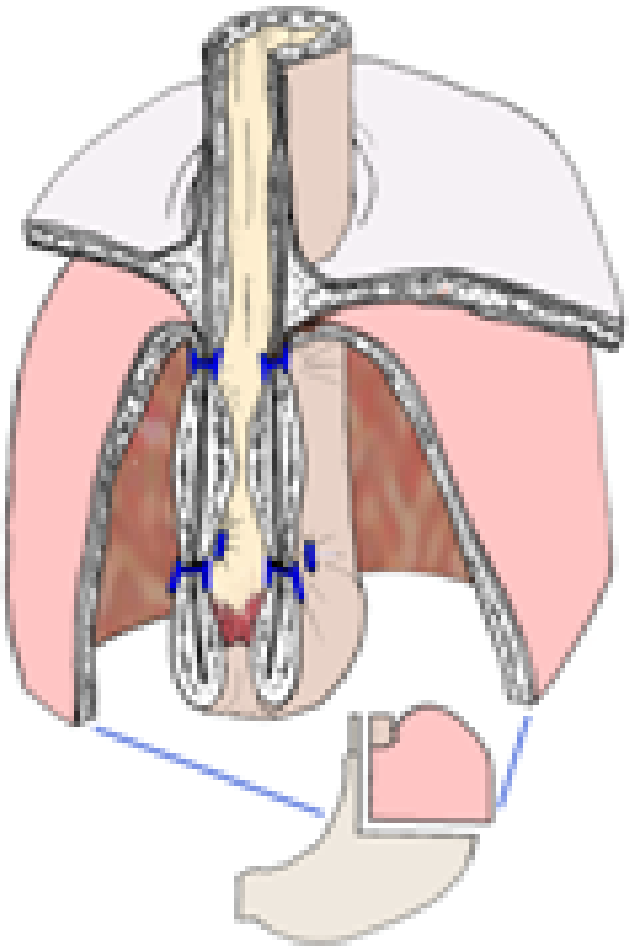

GRADE III


GRADE IV

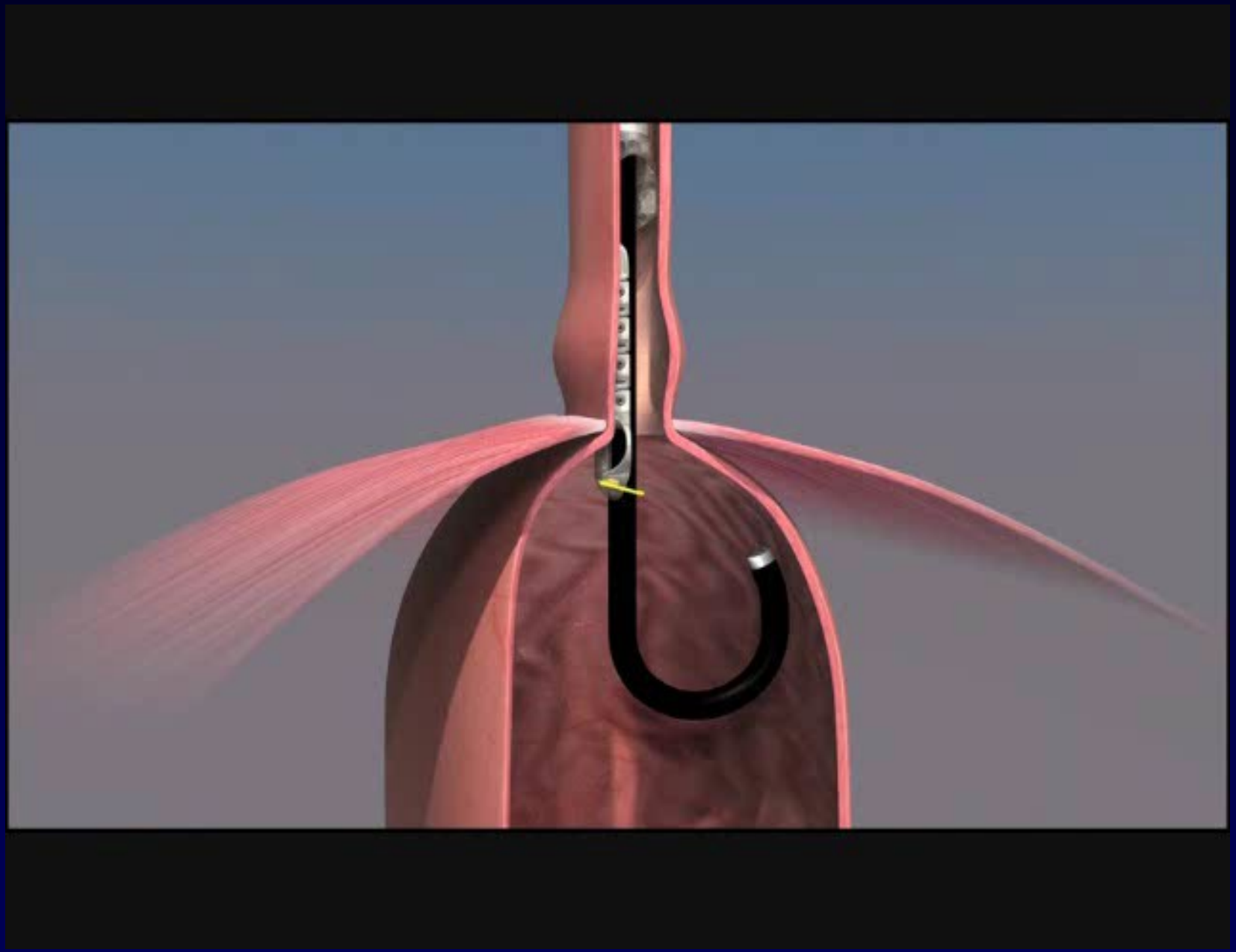
ESOPHYX

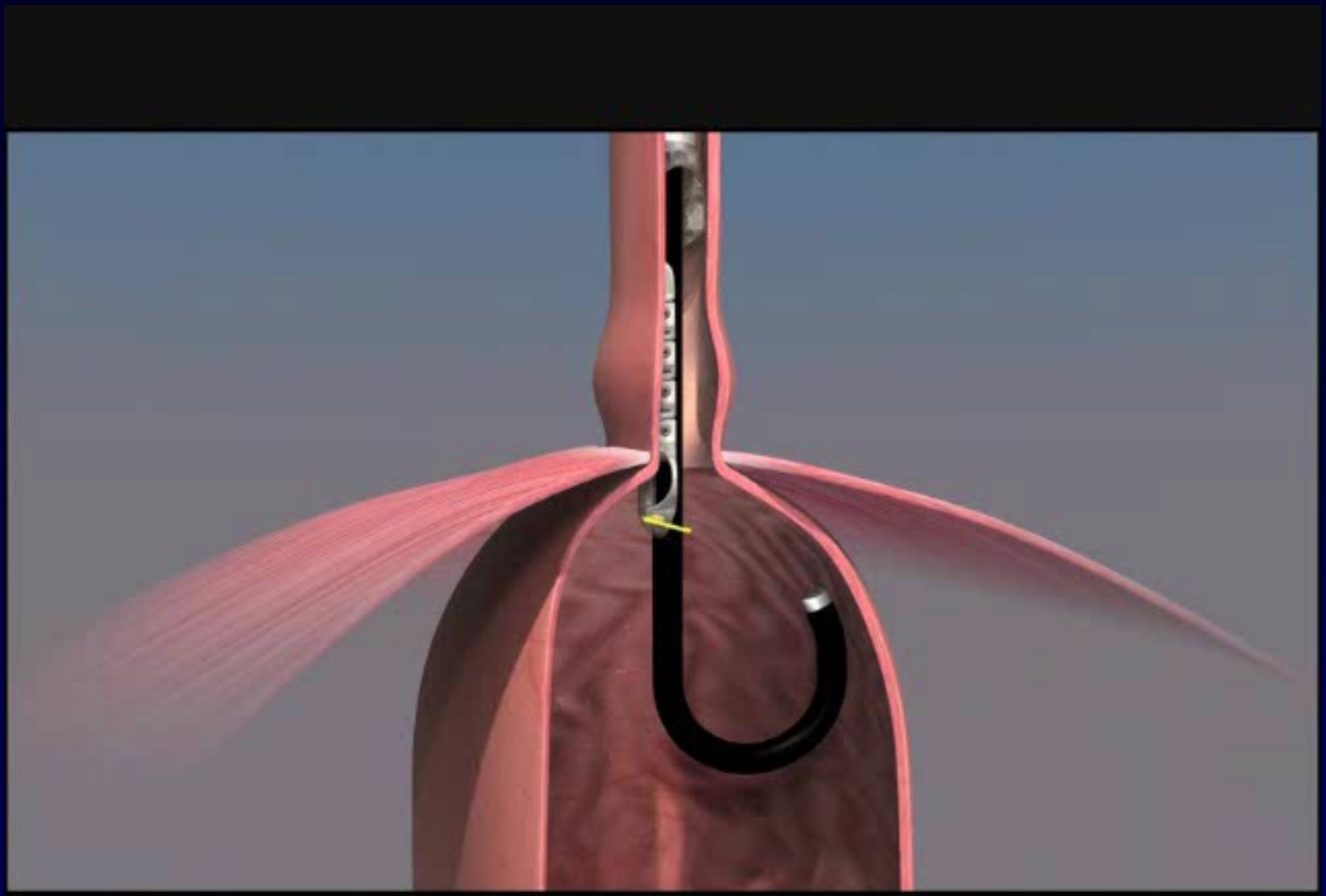
ποιες οι βασικές αρχές της μεθόδου;

Final Surgical Results



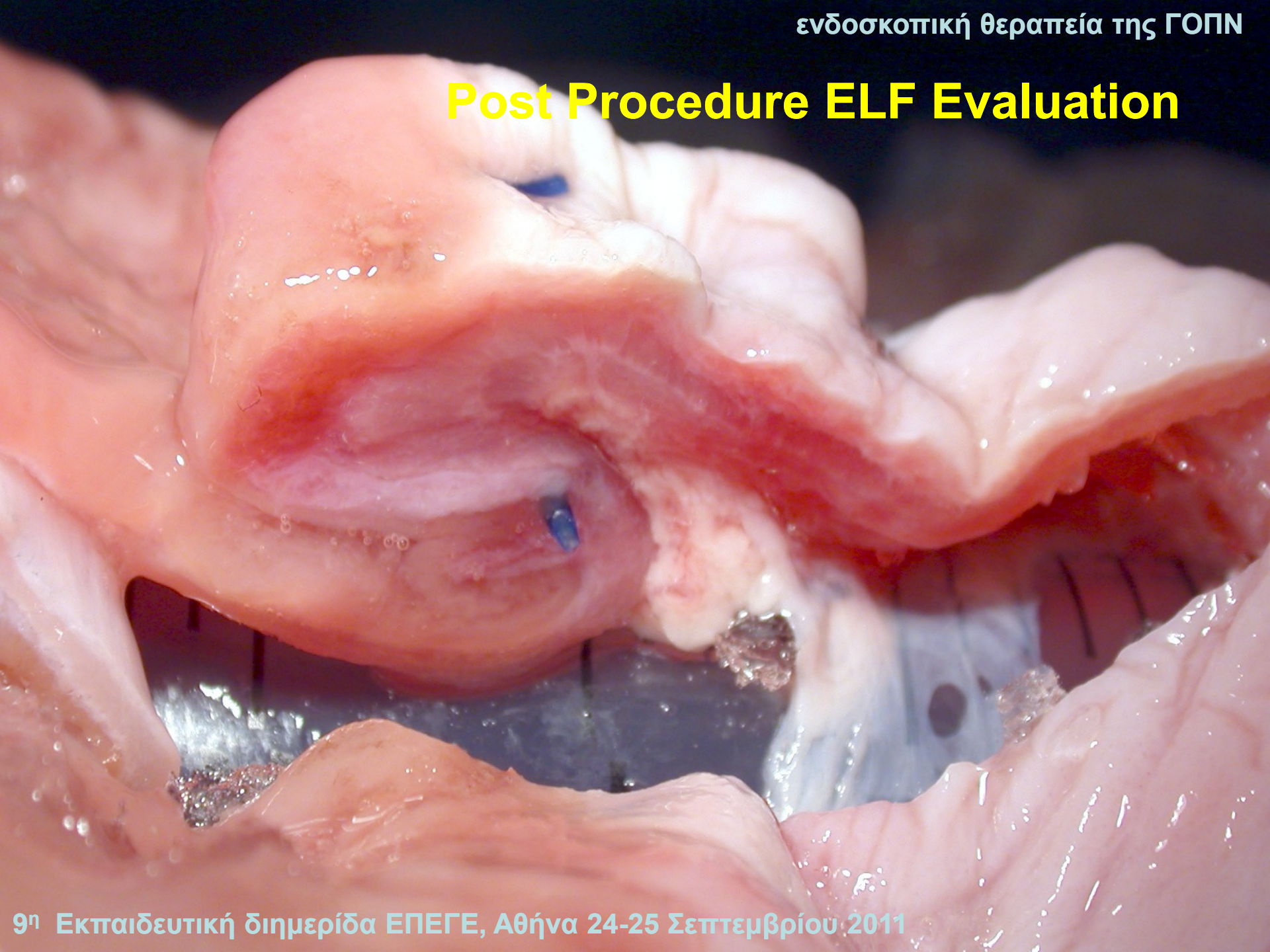
- Tighten anti-reflux barrier
- Lengthening of high pressure zone
- Recreated mechanical dynamics of the Angle of His
- Enveloped esophagus is compressed and more competent
- Hiatal hernia reduced 2cm or less
- 3 – 5 cm flap valve created






Mold and
Fasten

Post Procedure ELF Evaluation

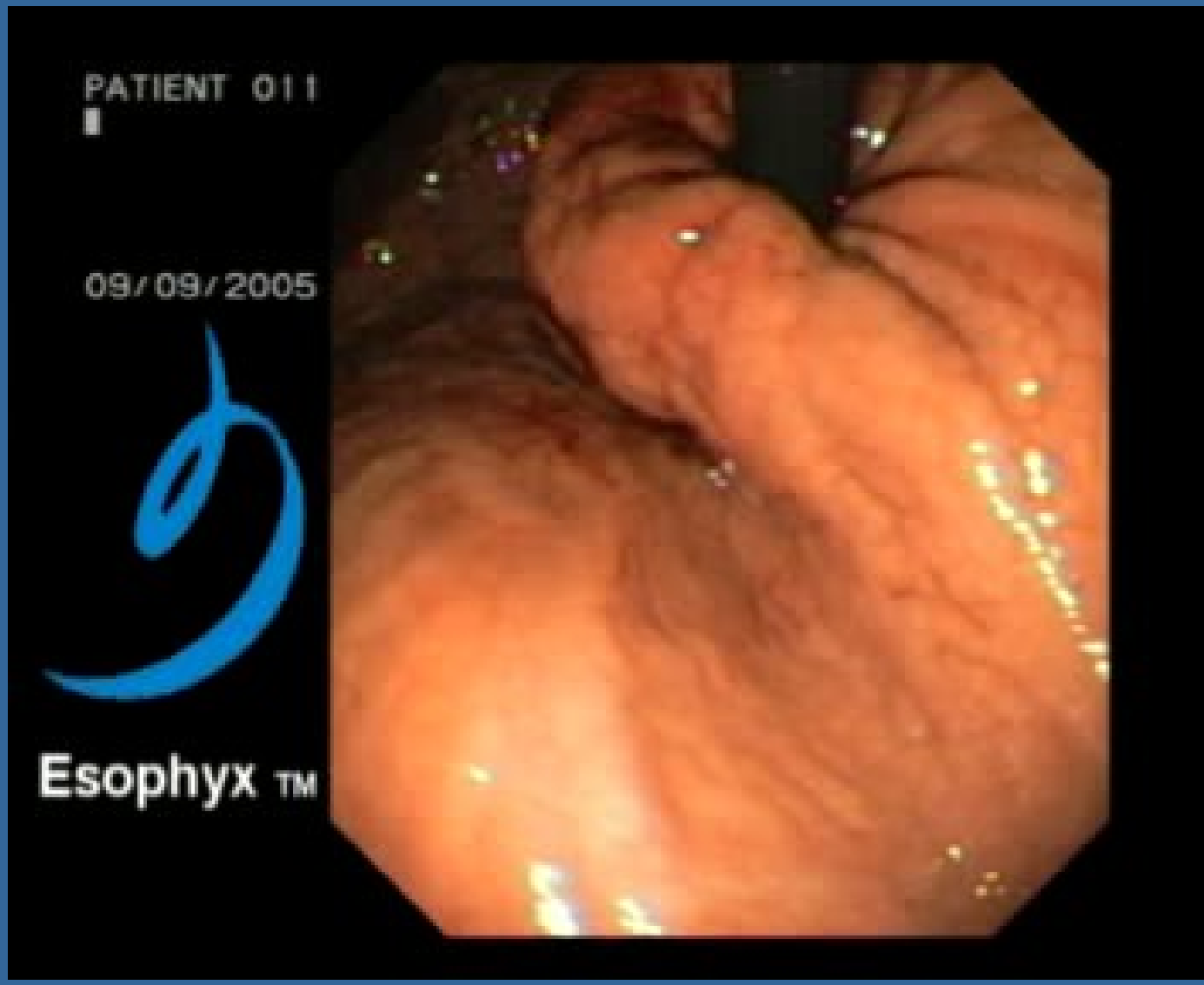


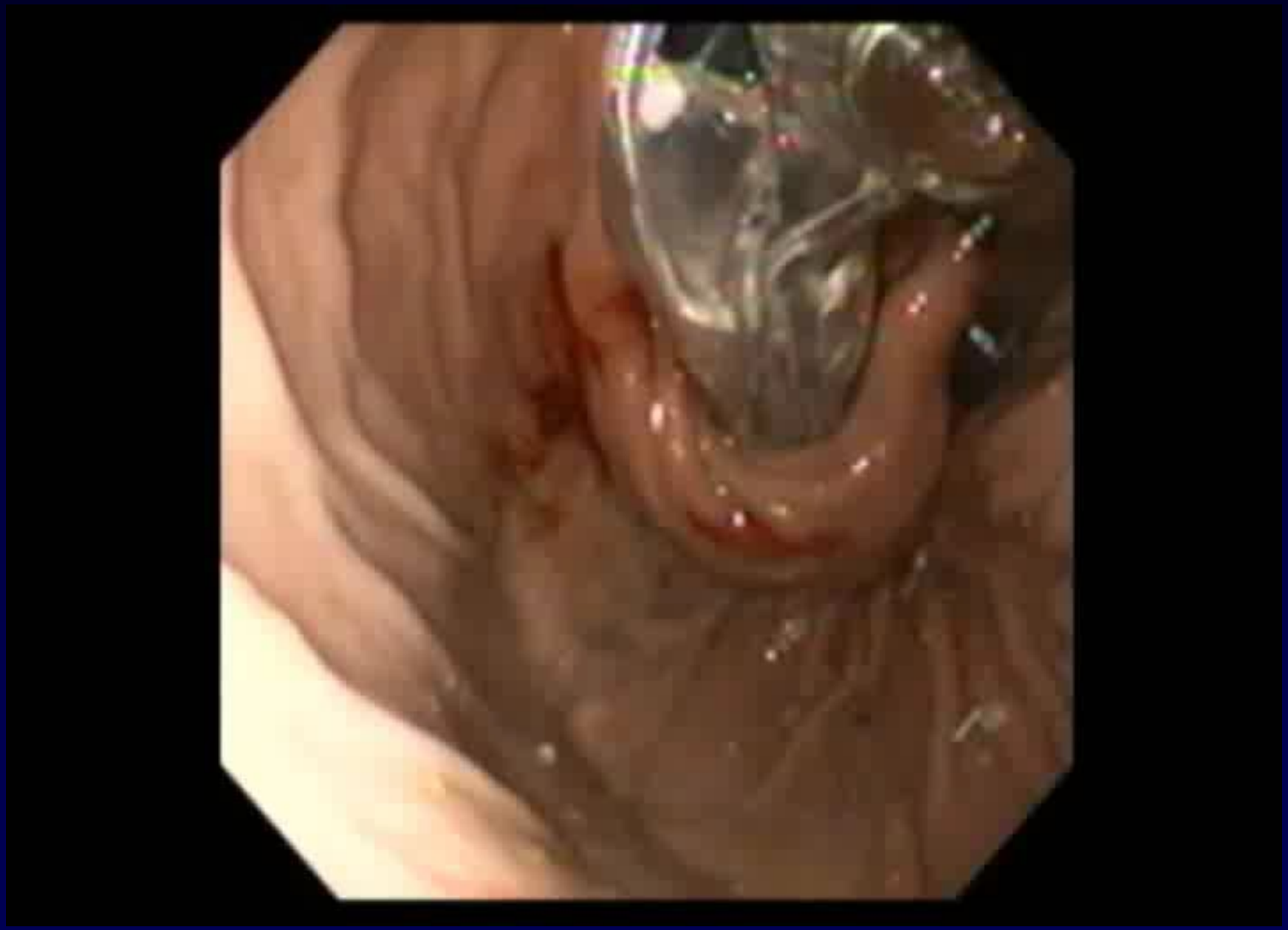
Post-Procedure Endoscopic Exam

valve 240-270°

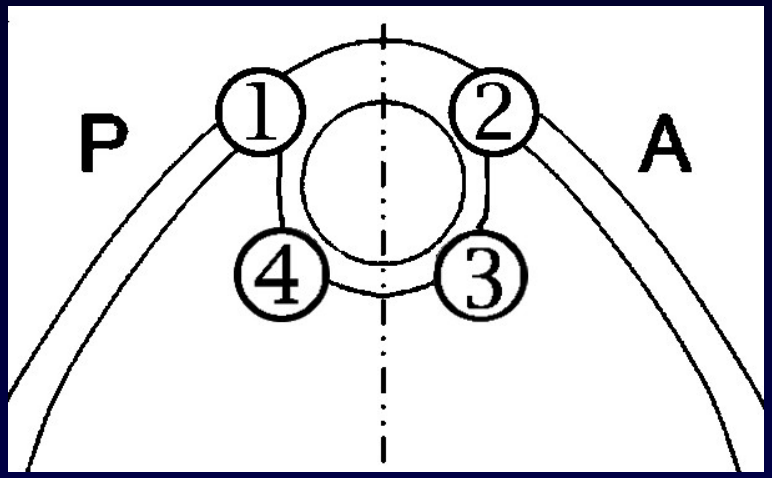
Ω shape

3-5 cm length



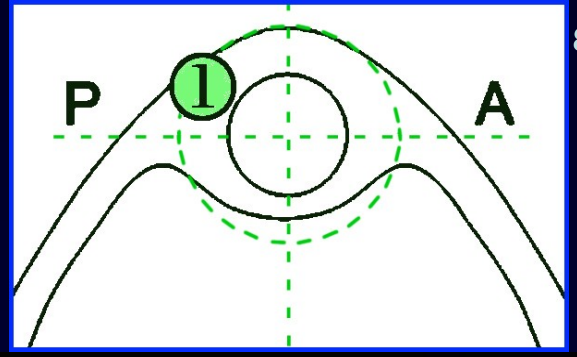


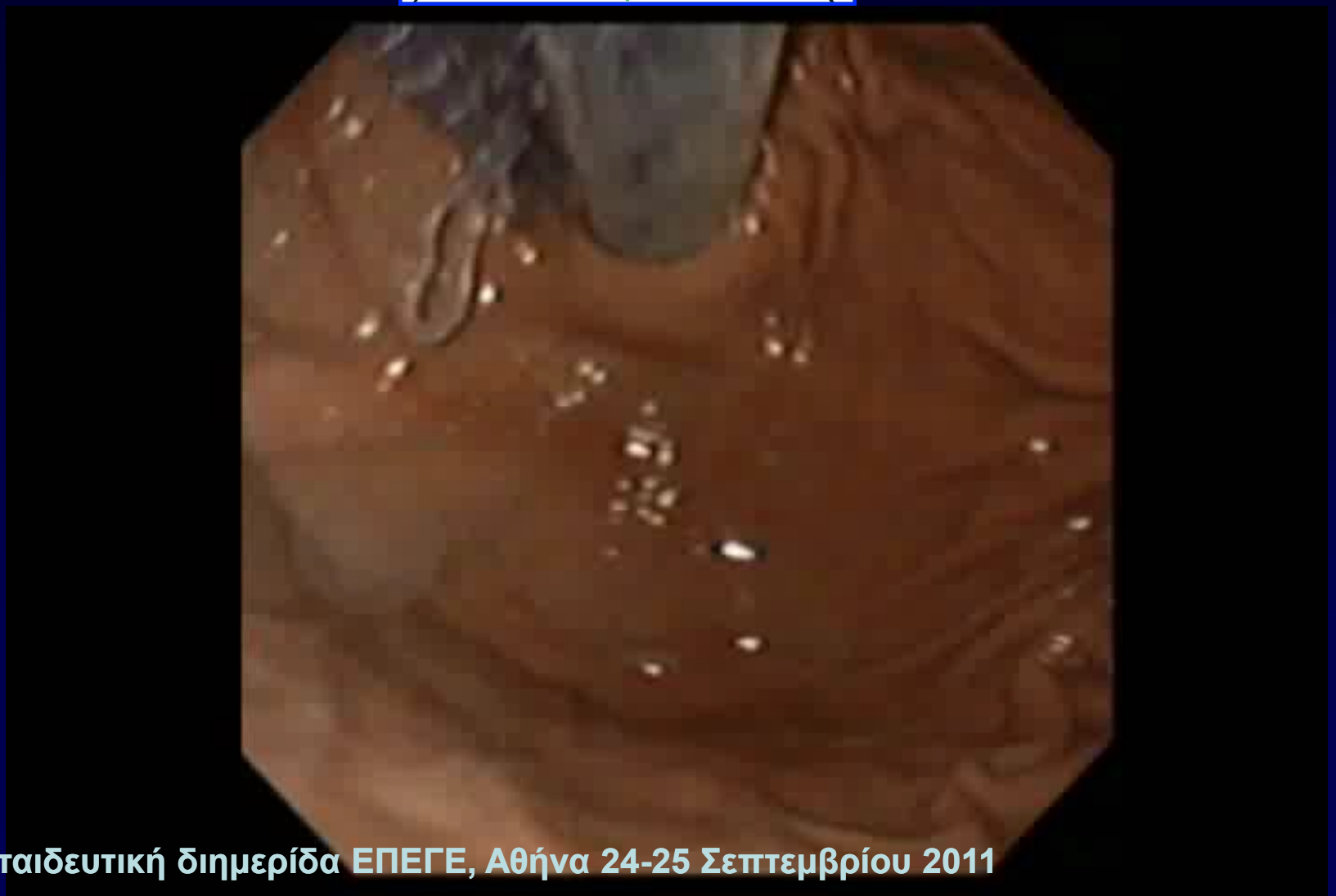
TIF 2 Helix Engagement Sites

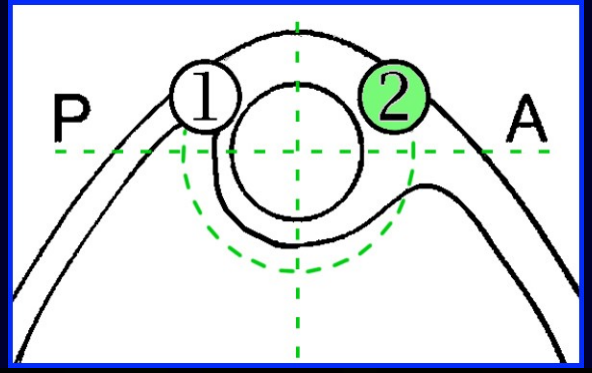


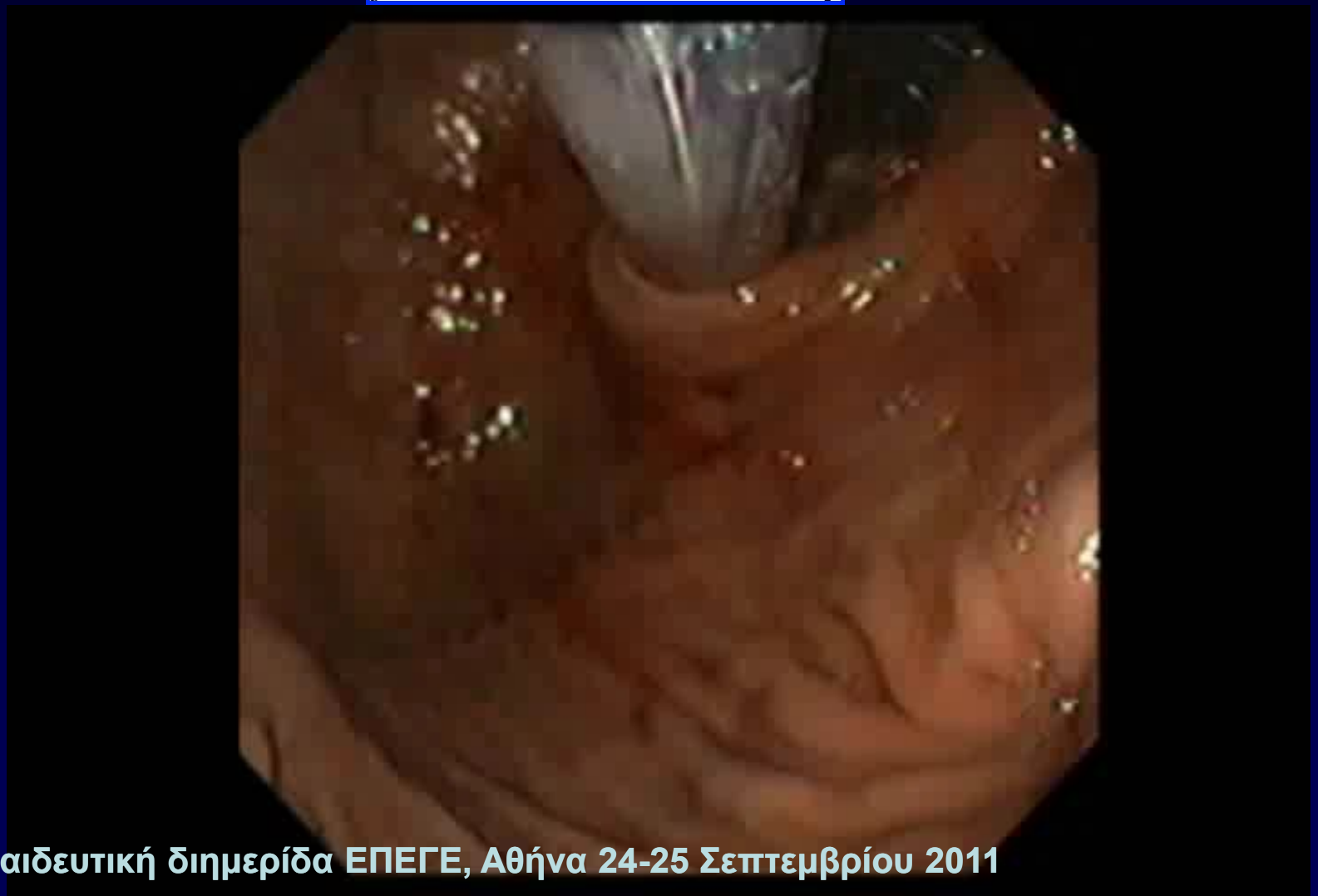
Four fasteners are placed at sites 1 & 2
Two fasteners are placed at sites 3 & 4

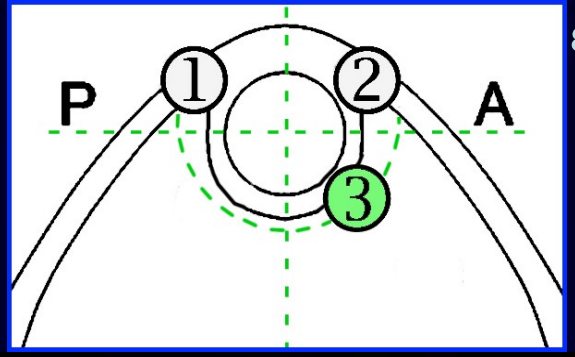
Additional fasteners may be placed if desired

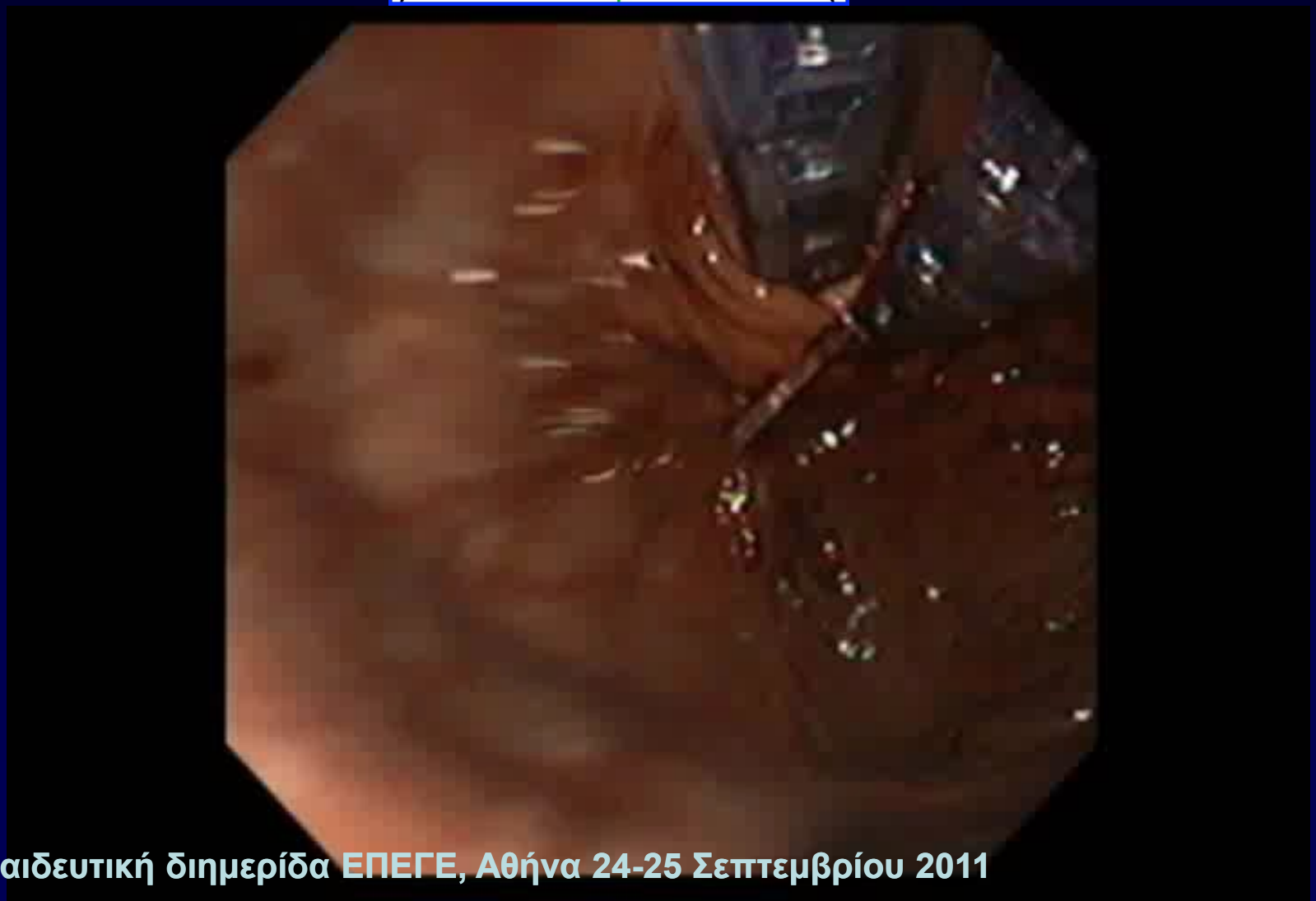

P
1
A

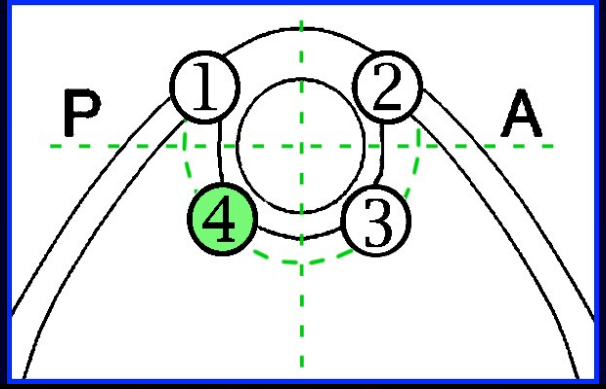


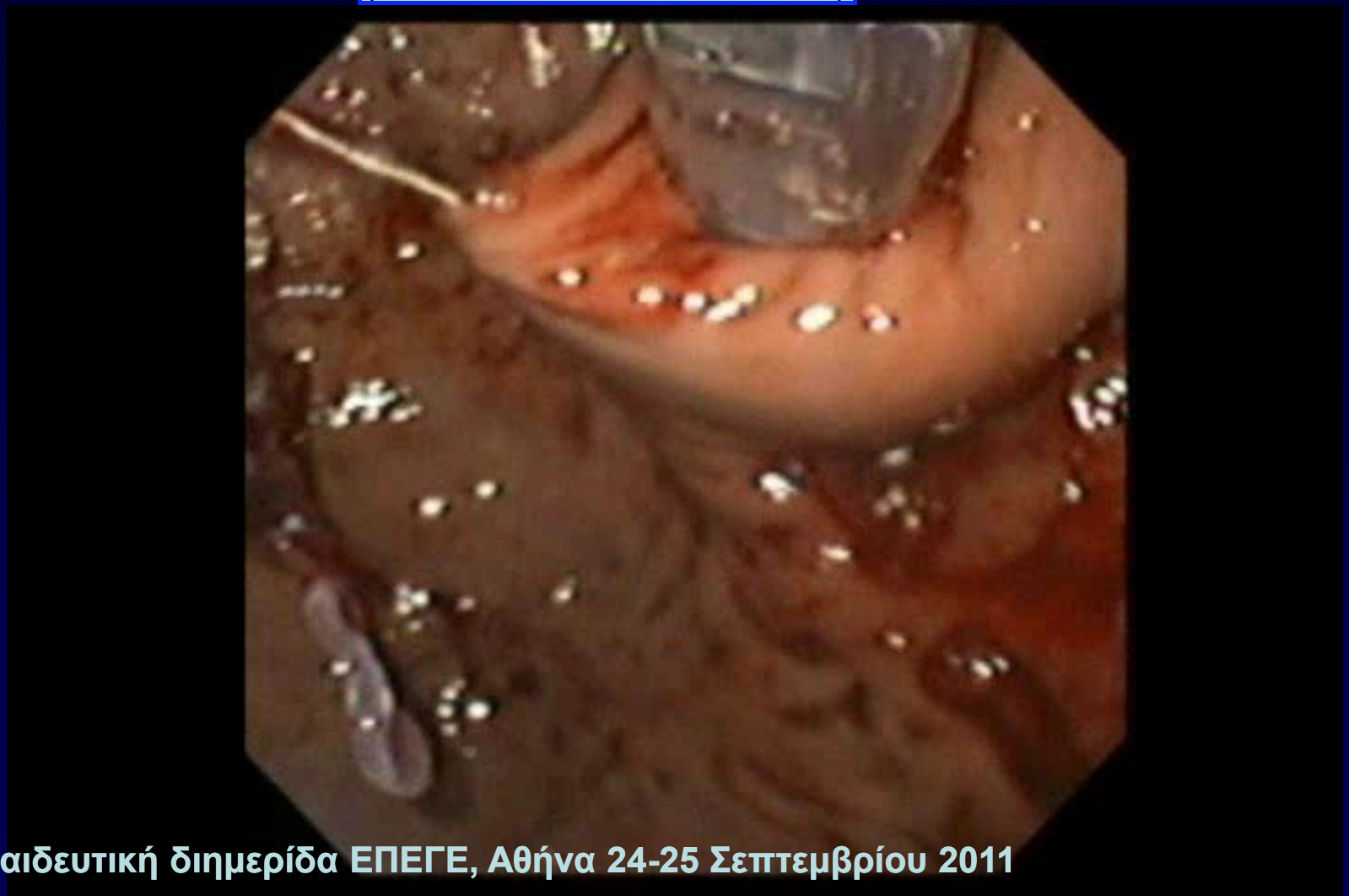

P
1
2
A

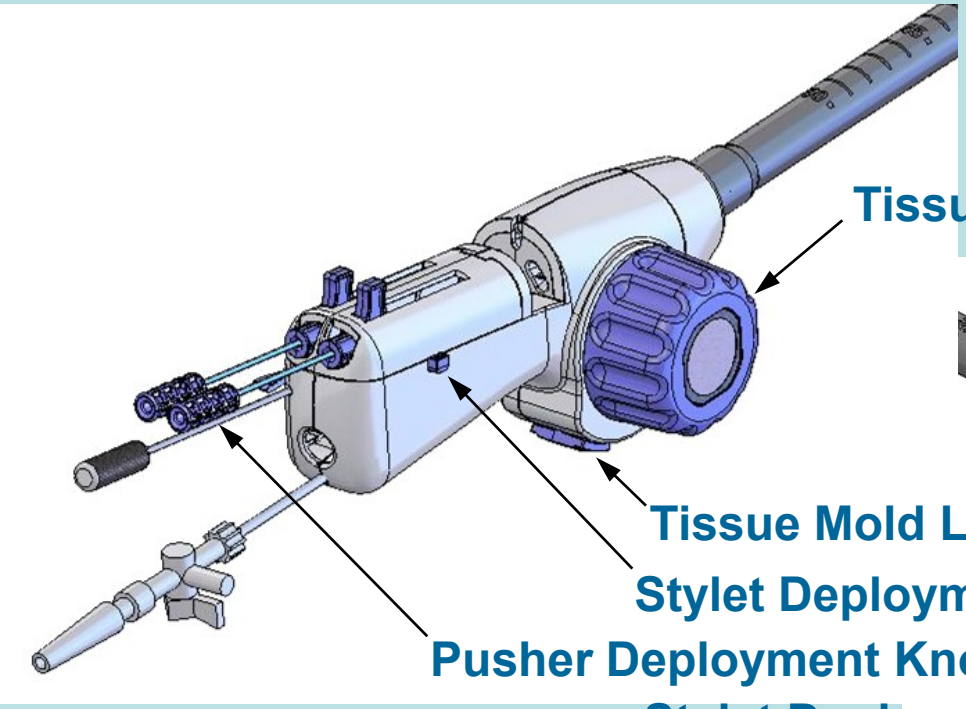


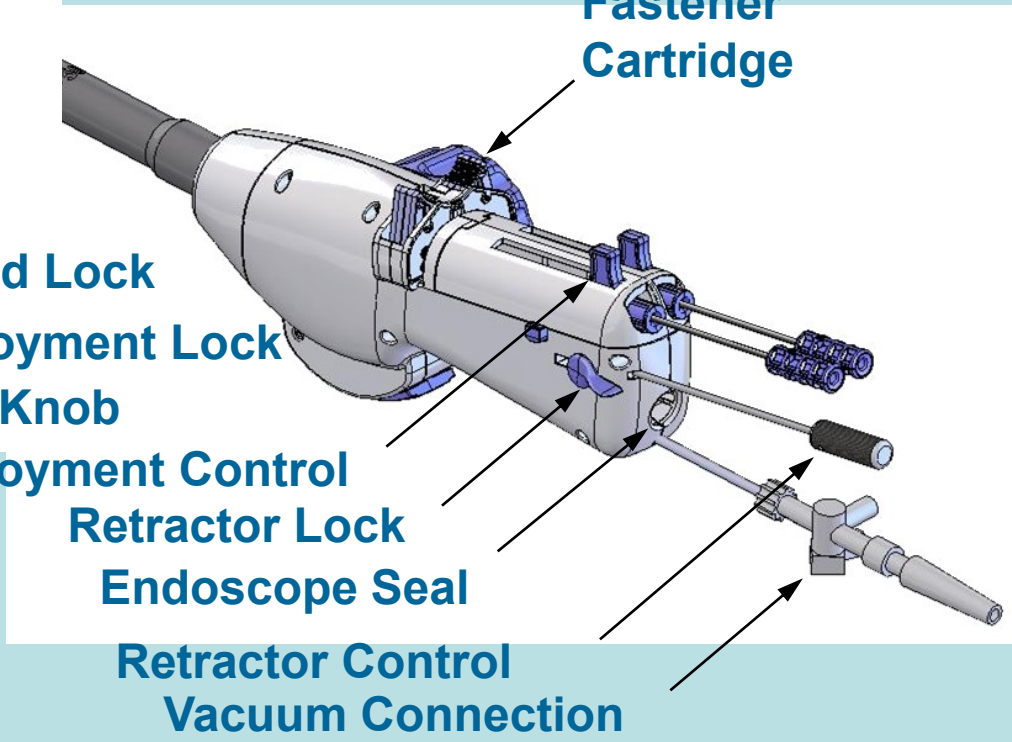

P
1
2
3
A




P
A
1
2
3
4




Tissue Mold Control
Tissue Mold Lock
Stylet Deployment Lock
Pusher Deployment Knob


Fastener Cartridge
Stylet Deployment Control
Retractor Lock
Endoscope Seal
Retractor Control
Vacuum Connection

the 12-month results showed that EsophyX-TIF was safe and effective in improving in chronic GERD patients:

- quality of life and for reducing symptoms
- PPI use
- hiatal hernia, and esophagitis, as well as
- increasing the LES resting pressure
- normalizing esophageal pH
- cardia circumference

Cadiere GB, Buset M, Muls V, Raian A, Rosch T, Eckardt AJ, Weerts J, Bastens B, Costamagna G, Marchese M, Louis H, Mana F, Sermon F, Gawlicka AK, Daniel MA, Deviere J. Antireflux Transoral Incisionless Fundoplication Using EsophyX: 12-Month Results of a Prospective Multicenter Study. World J Surg. 2008 Apr 30

The study demonstrated technical feasibility and safety of the ELF procedure using the EsophyX device.

The study also demonstrated maintenance of the anatomical integrity of the ELF valves for 12 months and provided preliminary data on ELF efficacy in reducing the symptoms and medication use associated with GERD

Cadiere GB, Raian A, Germay O, Himpens J. Endoluminal fundoplication by a transoral device for the treatment of GERD: A feasibility study. Surg Endosc. 2008 Feb;22(2):333-42.

Bergman S, et al. Endolumenal fundoplication with EsophyX: the initial North American experience. *Surg Innov. 2008 Sep;15(3):166-70*

Cadière GB, Van Sante N, Graves JE, Gawlicka AK, Rajan A.
Two-years results of a feasibility study on antireflux transoral incisionless fundoplication using EsophyX

Surg Endosc. 2009

Demyttenaere SV, et al.
Transoral incisionless fundoplication for gastroesophageal reflux disease in an unselected patient population.
Surg Endosc. 2009 Sep 3

93% of patients reported a cessation of heartburn

71% of patients were completely off daily PPIs

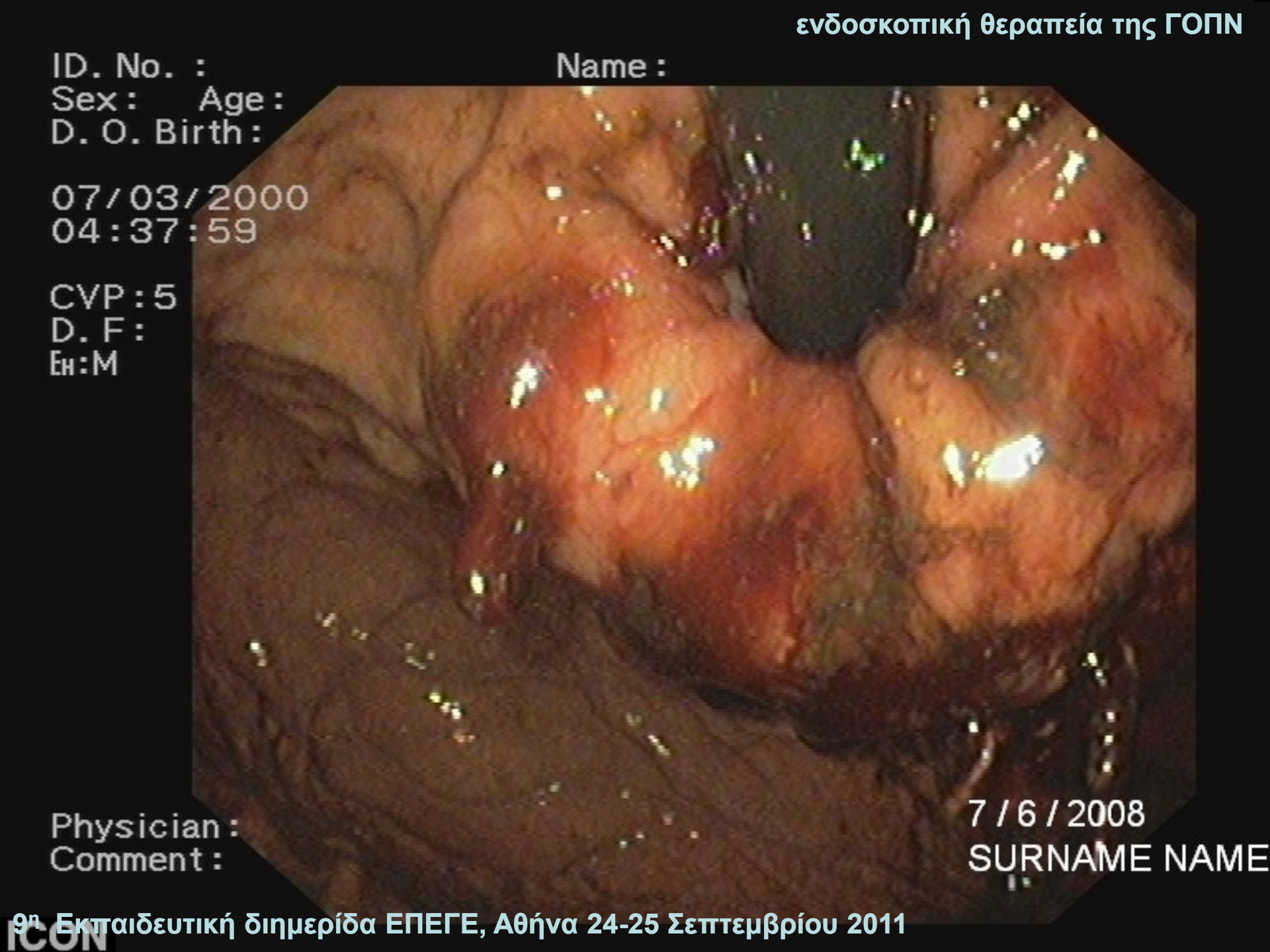
64% of patients had a ≥ 50% improvement in HRQL

79% of patients experienced a complete cure or remission of their GERD

86% of patients were satisfied with TIF

At 2 years no adverse events related to TIF were reported

Cadière GB, et al.Surg Endosc. 2009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Name :
Sex : Age :
D. O. Birth :
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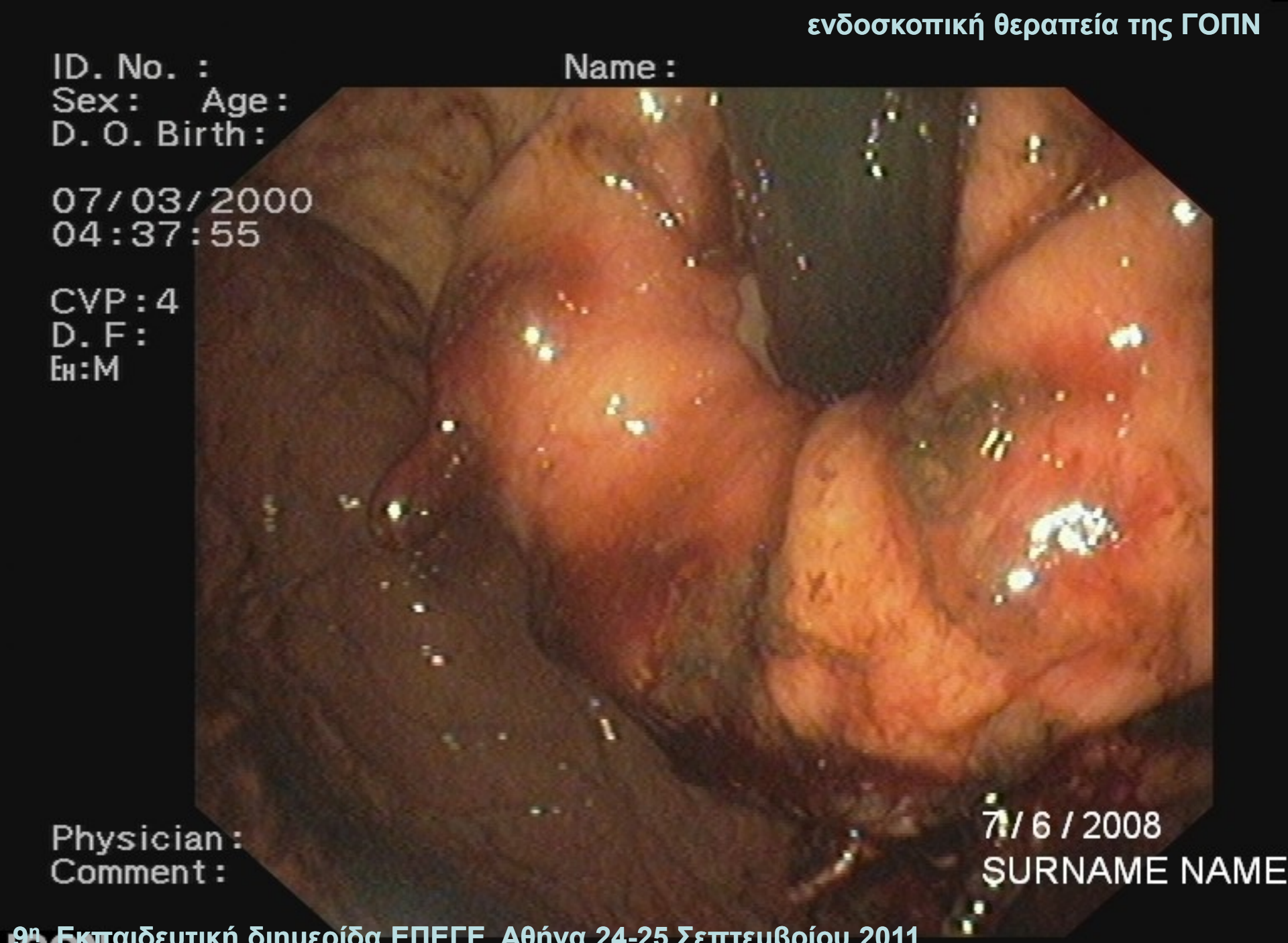
D. F :
EH:M
Physician :
Comment :
7 / 6 / 2008
SURNAME NAME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7/ 6 / 2008
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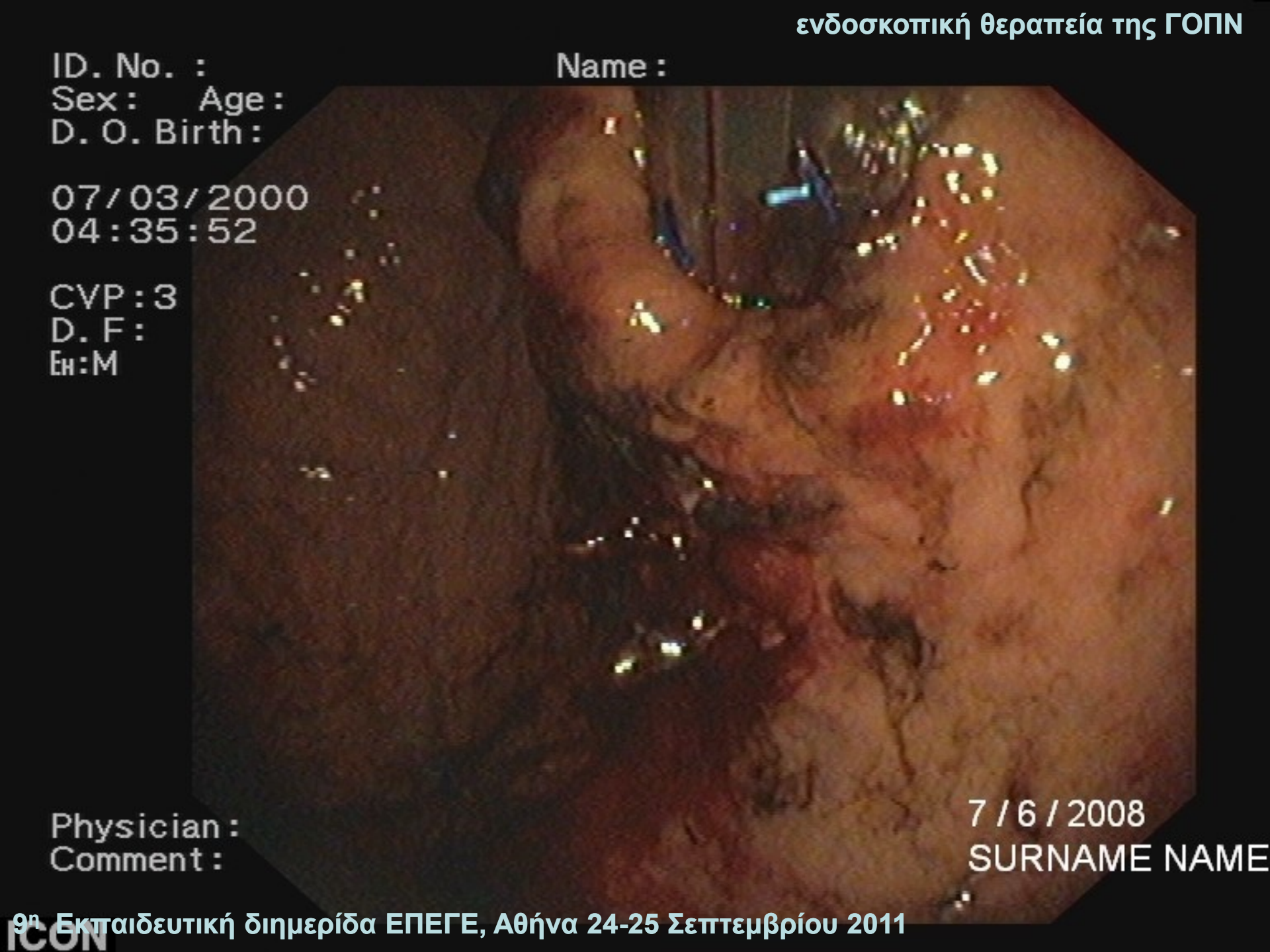
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Physician :
Comment :
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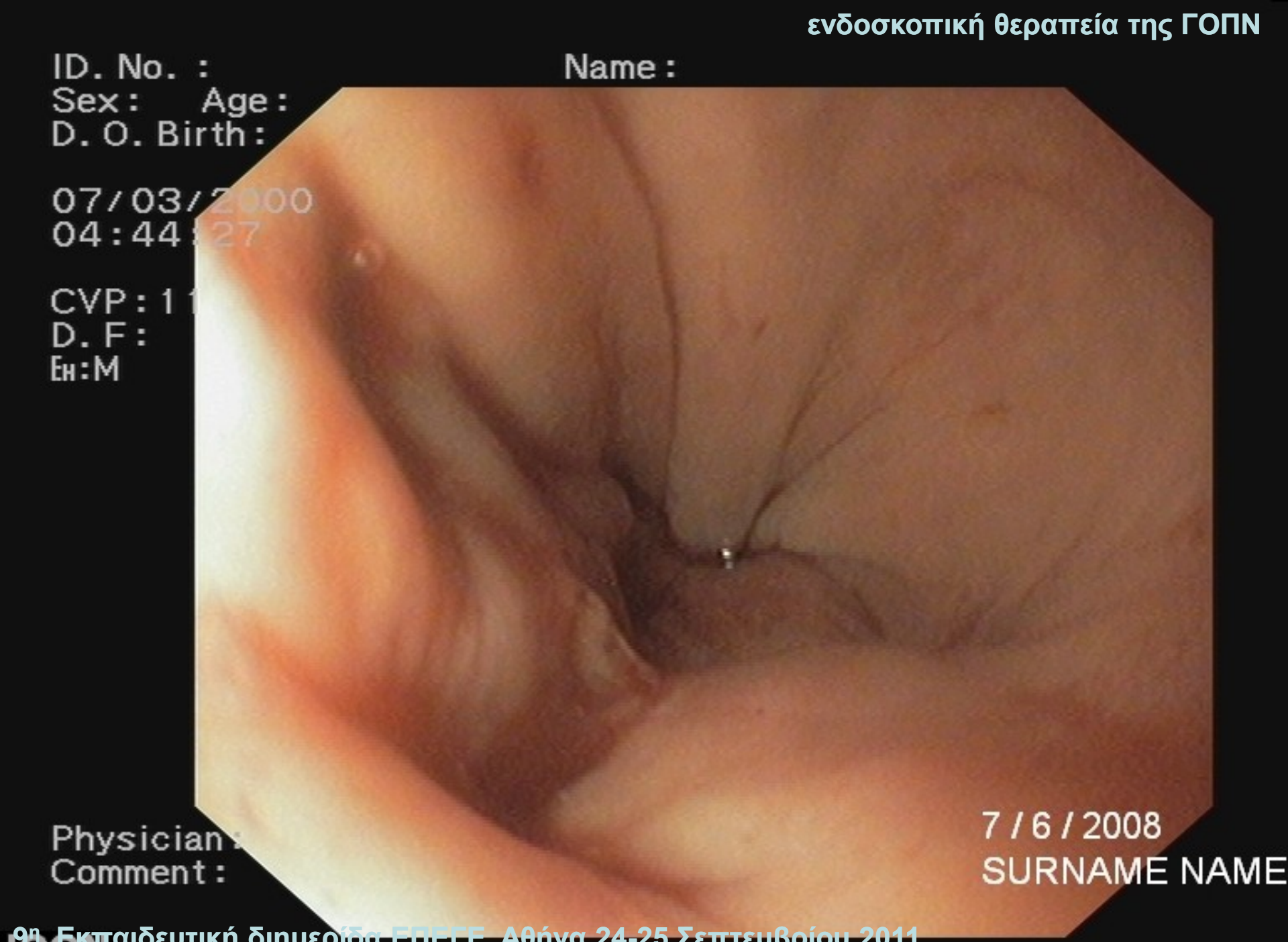
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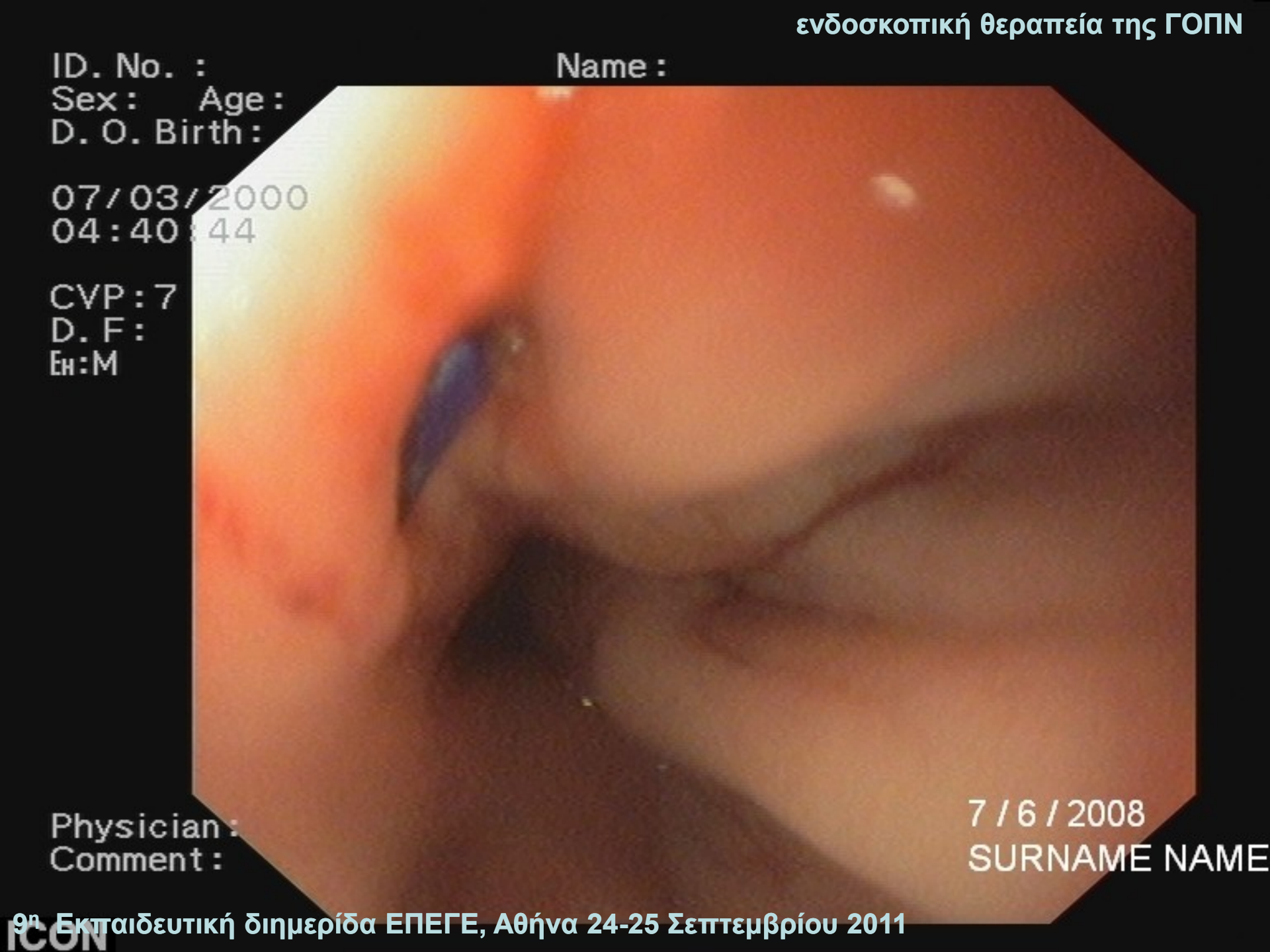
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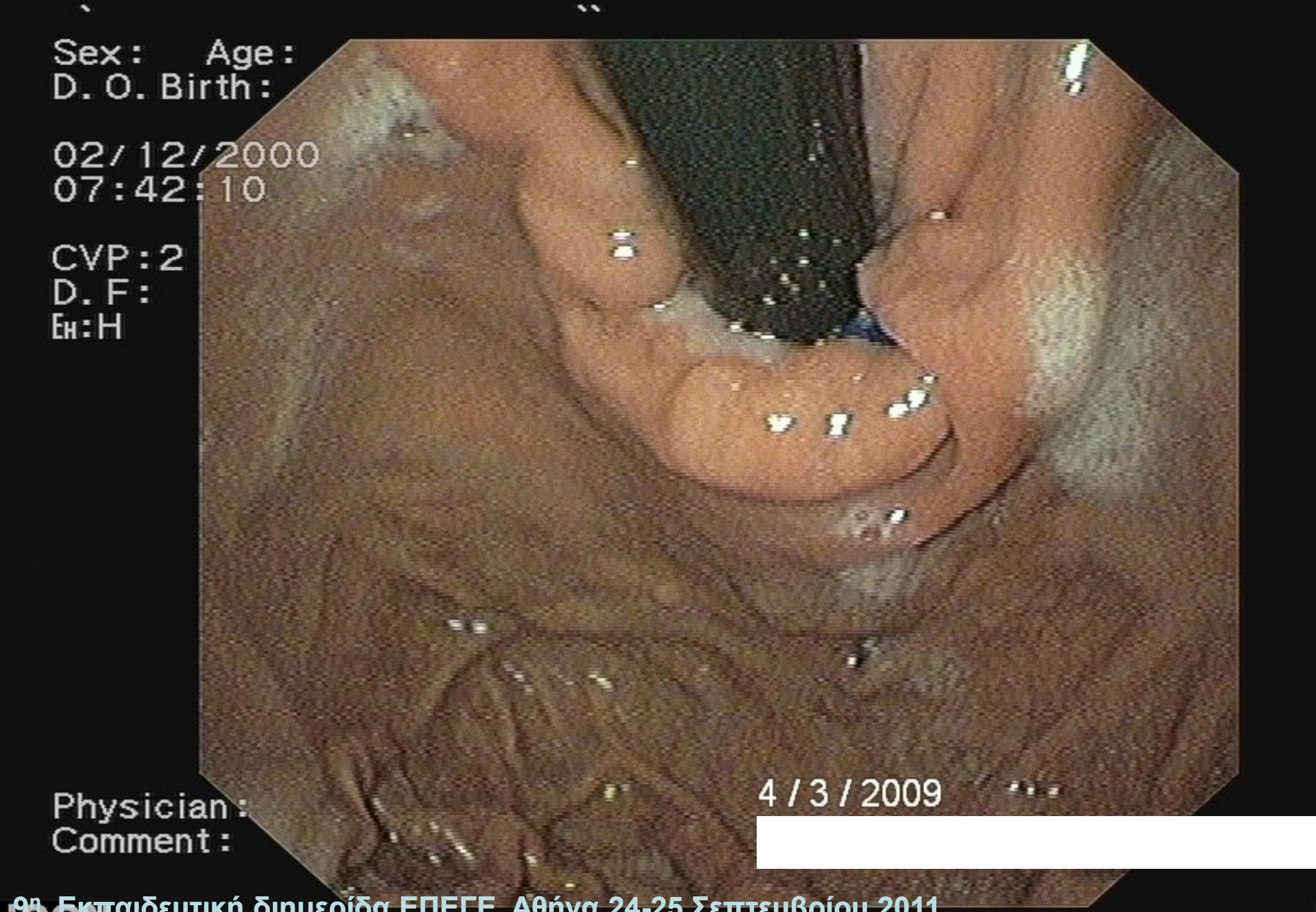
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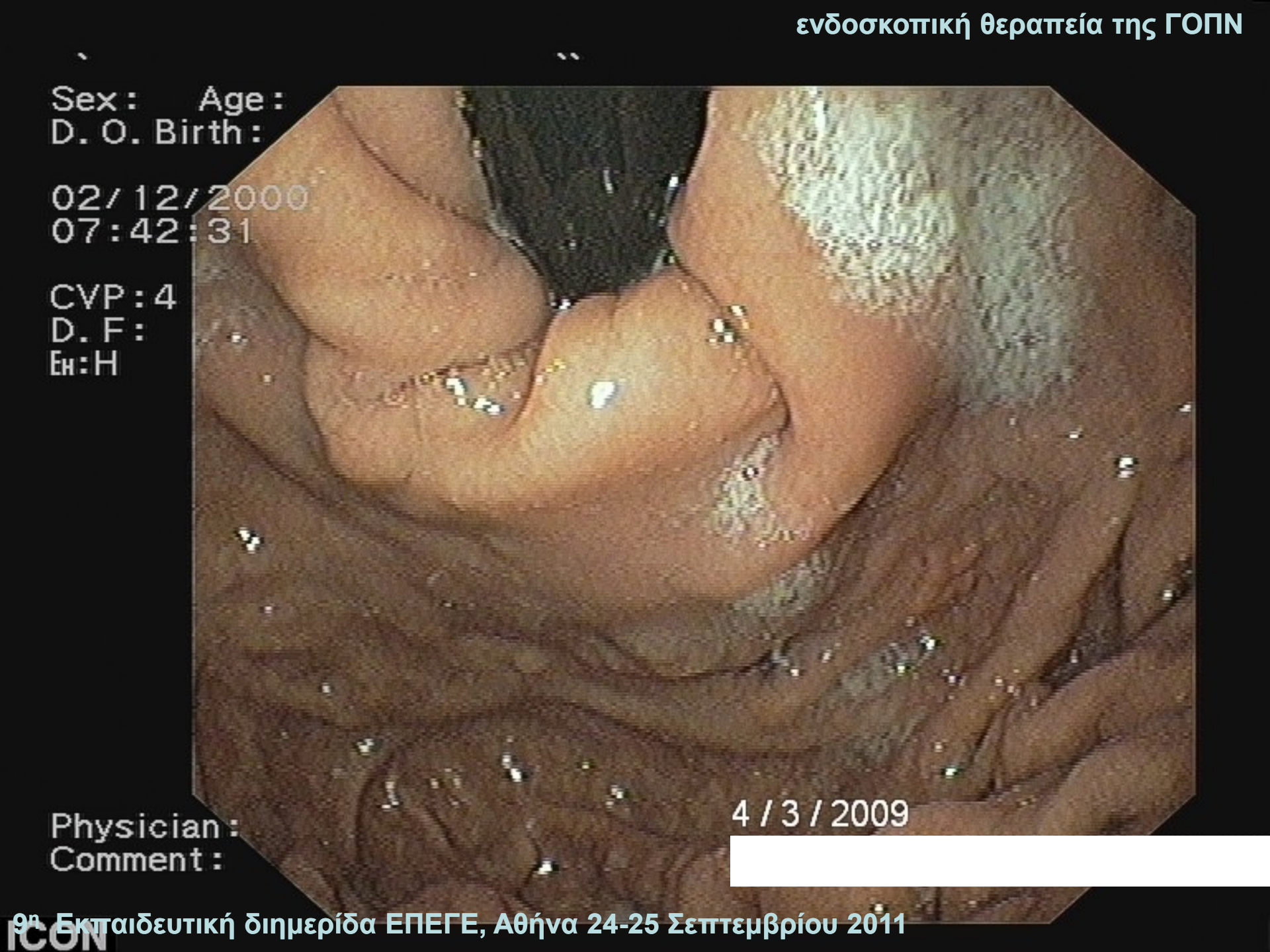
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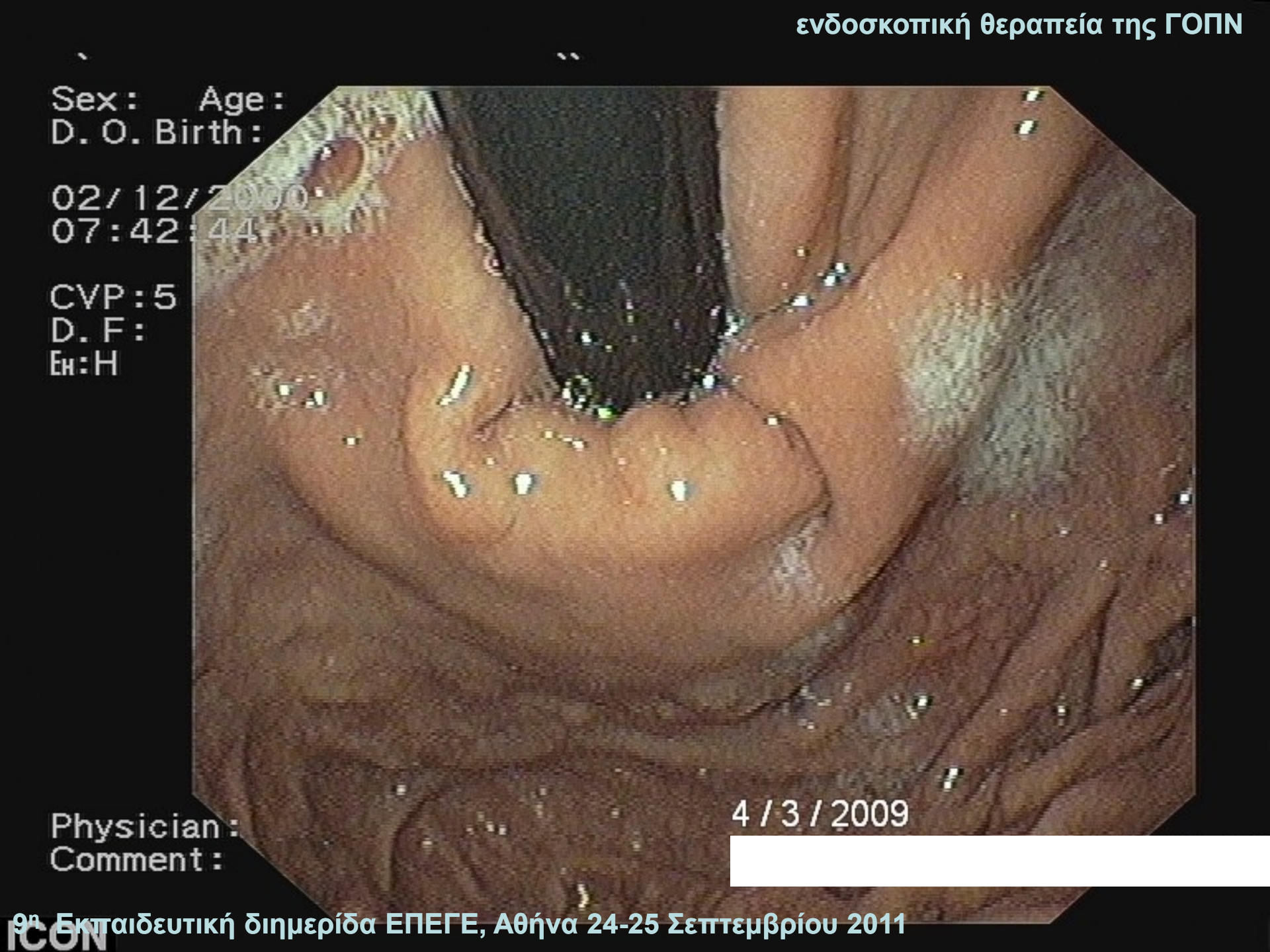
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En:H
Physician:
Comment:
4/3/2009

αντενδείξεις

- BMI > 35
- κιρσοί οισοφάγου
- επιπλοκές οισοφαγίτιδας
- κινητικές διαταραχές οισοφάγου
- ολισθαίνουσα διαφραγματοκήλη > 2-3 cm
- Barrett ;
- ηλικία < 18 ;

ΓΑΣΤΡΕΝΤΕΡΟΛΟΓΙΚΗ ΚΛΙΝΙΚΗ ΝΝΑ

Νοέμβριος 2007 – Σεπτέμβριος 2010

αποτελέσματα από 43 ασθενείς

26 με f/u ≥ 12 μηνών

25 →	αναφέρουν βελτίωση
19 →	βελτιωμένη pH μετρία
12 →	φυσιολογική pH μετρία
14 →	πλήρης διακοπή PPIs
8 →	λήψη PPIs 1-4 ανά μήνα
3 →	ανά 2 ημέρες
2 →	με οισοφαγίτιδα

ΣΥΜΠΕΡΑΣΜΑΤΙΚΑ

- ασφαλής και αποτελεσματική μέθοδος
- γενική αναισθησία με διαρινική διασωλήνωση
- σημαντικής διάρκειας καμπύλη εκμάθησης

προσεκτική επιλογή ασθενών

α. νέοι σχετικά ασθενείς που επιθυμούν να διακόψουν-περιορίσουν τη λήψη PPIs

β. εξωοισοφαγικές εκδηλώσεις-επιπλοκές

υπάρχει σύγκριση με την λαπαροσκοπική Nissen;

η ενδοσκοπική θολοπλαστική μειονεκτεί έναντι της λαπαροσκοπικής Nissen σε άριστο αποτέλεσμα κατά 20% περίπου

γιατί να προτιμήσω το esophyx;

- αθροιστικά άριστο και αρκετά καλό αποτέλεσμα σε περισσότερο από 85% των ασθενών
- λιγότερη επεμβατική προσέγγιση
- λιγότερες επιπλοκές
- επαναλήψημη
- μπορεί να προληφθεί ο Barrett σε νέο ασθενή;


ευχαριστώ πολύ
για την προσοχή σας