TIMED BARIUM ESOPHAGRAM TO CONFIRM PRESENCE OF ACHALASIA IN PATIENTS WITH INCONCLUSIVE DIAGNOSIS OF ACHALASIA DURING HIGH-RESOLUTION MANOMETRY

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A retrospective study of 29 patients with inconclusive achalasia diagnoses on high-resolution manometry found that timed barium esophagram and functional lumen imaging probe helped confirm achalasia and guide treatment decisions.

KEY POINTS

- Of 29 patients with inconclusive achalasia diagnoses (55.17% absent contractility, 44.82% esophagogastric junction outflow obstruction), 28.68% had delayed timed barium esophagram results.
- There was a significant correlation between inconclusive achalasia diagnosis on high-resolution manometry and delayed timed barium esophagram (OR 3.83, 95% CI 1.36-10.79, p=0.001).
- Esophagogastric junction outflow obstruction diagnosis was significantly correlated with esophageal stasis and delayed timed barium esophagram (p=0.025).
- Functional lumen imaging probe confirmed achalasia in one patient with significant correlation (p=0.0008), and all patients were referred for achalasia treatments.
- The authors conclude that patients with inconclusive achalasia on high-resolution manometry benefit from additional timed barium esophagram testing to confirm diagnosis and guide treatment.

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