gutflix
GI learning, personalised

Summary

TREATMENT MODALITIES FOR POST-COVID-19 ESOPHAGO-GASTRIC JUNCTION DISORDERS

Andreas N. Kapsoritakis

UEG Week Copenhagen 2023 | Poster

October 15, 2023

A study of 32 patients with post-COVID-19 dysphagia identified two distinct phenotypes by high-resolution manometry that require different therapeutic approaches: new-onset dysphagia associated with EGJ-outflow obstruction and aggravation of pre-existing dysphagia associated with achalasia.

KEY POINTS

- All 18 patients with new-onset dysphagia had EGJ-outflow obstruction and their dysphagia resolved under proton pump inhibitor treatment (20mg rabeprazole daily) over a median of 4 months with reduction in IRP from 17.4 to 13.4.
- All 14 patients with aggravation of pre-existing dysphagia exhibited type II or type III achalasia, did not respond to proton pump inhibitor treatment, and required endoscopic intervention with pneumatic dilatation or per-oral endoscopic myotomy.
- All patients treated with 30mm pneumatic dilatation for achalasia required further treatment escalation to either 35mm pneumatic dilatation or POEM for symptom resolution, with POEM proving more effective in reducing Eckardt scores (from 8 to 1) compared to 35mm pneumatic dilatation (from 8 to 3).
- Achalasia patients exhibited significantly higher median IRP values compared to the EGJ-outflow obstruction group (23.1 vs 17.4), and the EGJ-outflow obstruction group showed a female predominance with a female to male ratio of 2.7 to 1.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/60732138-743c-11ee-9fec-0242ac140004

AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.