gutflix
GI learning, personalised

Summary

# PROSPECTIVE STUDY BY HIGH-RESOLUTION ESOPHAGEAL MANOMETRY OF THE ESOPHAGO-GASTRIC JUNCTION IN OBESE SUBJECTS UNDERGOING SLEEVE GASTRECTOMY

Andreea Maria Sorcaru

UEG Week Copenhagen 2023 | Poster

Oesophagus

October 15, 2023

**A study using high-resolution manometry found that laparoscopic sleeve gastrectomy significantly reduced esophagogastric junction barrier function, with 50% of patients developing abnormal acid exposure postoperatively.**

KEY POINTS

- In 24 obese patients re-evaluated after laparoscopic sleeve gastrectomy, the esophagogastric junction contractile integral corrected for respiratory cycle decreased significantly from 46.7±36.8 to 32.3±26.4 mmHg·cm (p=0.02).
- Twelve patients (50%) showed acid exposure time above normal limits after surgery, and this correlated with the degree of reduction in esophagogastric junction contractile integral (r=0.525, p=0.01).
- At baseline, obese, overweight, and normal weight patients with GERD symptoms showed no statistical differences in esophagogastric junction contractile integral measurements.
- The authors suggest that high-resolution manometry and 24-hour pH-metry could be useful in pre-operative assessment to identify patients at risk of developing GERD after bariatric surgery.
- This material is relevant for gastroenterologists and bariatric surgeons evaluating candidates for sleeve gastrectomy.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/d93250c6-743c-11ee-8e74-0242ac140004

**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.