

Gastric diseases

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Presentation

Endoscopy

Gut Microbiota

IBD

Oesophagus

Stomach & H. Pylori

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Four advances in gastric disease management were presented: endoscopic fundic ablation for weight loss via ghrelin reduction, domperidone safety data for gastroparesis, PPI safety with dual antiplatelet therapy, and cryoballoon ablation for gastric vascular ectasia.

KEY POINTS

- Endoscopic argon plasma ablation of the gastric fundus in 10 adults with obesity (mean BMI 40) resulted in decreased ghrelin levels, 42% reduction in stomach capacity, and the speaker reported approximately 19-20 pounds weight loss at six months in this first-in-human trial.
- In 54 gastroparesis patients followed for nine months on domperidone, only one patient developed significant QT interval increase, two exceeded the 470 millisecond threshold, and no adverse cardiac events occurred, with 70% achieving clinical response at one year.
- A meta-analysis of randomized controlled trials showed that adding PPI therapy to dual antiplatelet therapy significantly reduced upper GI bleeding and all-cause mortality while major adverse cardiovascular events and myocardial infarction rates were similar between PPI and non-PPI groups.
- Multicenter trial of cryoballoon ablation for gastric antral vascular ectasia reduced median transfusion requirements from 5.7 units per month to 0.6 units per month at six months, with hemoglobin increasing from 6.5 to 11.5.
- The speaker noted domperidone is currently unavailable in the US but is under FDA orphan drug evaluation for hyperprolactinemia and may become available within a year.

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