THE ROLE OF SALIVA PRODUCTION AND ESOPHAGEAL MOTOR FUNCTION IN POST-REFLUX SWALLOW INDUCED PERISTALTIC WAVE (PSPW) RELATED ESOPHAGEAL ACID CLEARANCE

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Retrospective study of 48 patients with Sjogren's syndrome or scleroderma/ MCTD found that Sjogren's syndrome independently predicted impaired pH recovery after reflux despite similar reflux metrics to comparison patients, suggesting saliva production may be more important than motor function.

KEY POINTS

- Among 34 Sjogren's syndrome, 14 scleroderma/MCTD, and 96 comparison reflux patients, Sjogren's patients showed lower proportions with complete pH recovery with PSPW compared to comparison patients (38.1% vs 55.6%, p=0.009), predominantly in subsets with hypomotility.
- Scleroderma/MCTD patients had higher acid exposure time, higher prevalence of hypomotility, lower detected reflux episodes, and very low numbers of PSPW compared to other groups.
- No difference in pH impedance metrics was found between Sjogren's syndrome and comparison patients overall or in subsets with and without hypomotility.
- Multivariable analysis showed that only higher total reflux episodes and diagnosis of Sjogren's syndrome independently predicted lack of complete pH recovery with PSPW, while failed and ineffective swallows and acid exposure time were not predictive.
- The authors conclude that saliva production may be more important than motor function in PSPW-related pH recovery, based on findings from this retrospective study at 2 motility centers over 5 years.

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