Manometry is the only technique to study small bowel motility

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Small bowel manometry is the only available technique that can characterise physiological patterns of small bowel motor activity, with high-resolution catheters expanding diagnostic capability beyond conventional methods.

KEY POINTS

- In a systematic series of 27 chronic intestinal pseudo-obstruction patients evaluated with high-resolution manometry, all had abnormal recordings, with 16 showing severe hypomotility and 11 showing uncoordinated motility.
- Among 46 systemic sclerosis patients studied, 70% had clear small bowel motility abnormalities on manometry and 37% had severe hypomotility, with researchers now following these patients to assess correlation with morbidity and mortality.
- High-resolution manometry reveals phase-two propagated contractions not visible on conventional recordings, and systemic sclerosis patients show clear reductions in these contractions even when conventional criteria appear normal.
- Manometry limitations include its invasive nature, five-hour duration, availability at very few centres, need for expertise to interpret recordings, and lack of well-established diagnostic criteria.
- The speaker is collaborating with Mayo Clinic on AI-assisted analysis that automatically detects propagations, with future directions including multicenter reference values and consensus diagnostic criteria.

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