THE ROLE OF LARYNGOSCOPY IN GERD PATIENTS WITH ATYPICAL SYMPTOMS - A MULTICENTRE STUDY

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A multicenter Italian study of 274 patients with atypical GERD symptoms found laryngoscopy has poor specificity (32.0%) for diagnosing GERD, with 71.2% showing pathological laryngeal findings but only 29.2% confirmed to have GERD on pH-impedance monitoring.

KEY POINTS

- Laryngoscopy showed pathological findings in 195 of 274 patients (71.2%), most commonly posterior laryngitis (77.4%), but GERD was confirmed by pH-impedance monitoring in only 80 patients (29.2%).
- Sensitivity and specificity of laryngoscopy for GERD diagnosis were 78.8% and 32.0% respectively, with positive predictive value of 32.3% and negative predictive value of 28.4%.
- No statistically significant difference was found in GERD prevalence between patients with positive versus negative laryngoscopy (p=0.075), nor in proximal reflux counts (p=0.133).
- The study concludes that pathological laryngoscopy findings should only raise suspicion of GERD, and diagnosis requires confirmation with 24-hour pH-impedance monitoring even in patients with atypical symptoms.
- This multicenter retrospective study from six Italian tertiary centers would be relevant to gastroenterologists and ENT specialists managing patients with suspected reflux-related atypical symptoms.

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