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GI learning, personalised

Summary

Upper GI disorders

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Rome V criteria for oesophageal and gastroduodenal disorders of gut-brain interaction introduce refined diagnostic definitions, including a new inability-to-belch syndrome, and clarify the spectrum from acid-related reflux disease to functional disorders such as functional heartburn and functional dyspepsia subtypes.

KEY POINTS

- The speaker described reflux symptoms as existing on a spectrum, with acid-related disease and high PPI efficacy on one end and disorders of gut-brain interaction (functional heartburn, reflux hypersensitivity) driven by oesophageal sensitivity on the other, where approximately one-third of patients presenting with reflux symptoms have DGBIs rather than GERD.
- Rome V defines reflux by esophagitis grade B–D, acid exposure time greater than 6 percent on pH monitoring, peptic stricture, or Barrett's oesophagus, and distinguishes non-reflux as acid exposure time below 4 percent with normal endoscopy and fewer than 40 reflux episodes on impedance, with a grey zone in between.
- Functional dyspepsia retains the term functional and its two subtypes, postprandial distress syndrome and epigastric pain syndrome, with the addition that postprandial epigastric pain is now part of PDS if symptoms are meal-related, and Rome V allows a test-and-treat strategy for H. pylori without mandatory endoscopy in the absence of alarm symptoms.
- A new diagnosis, inability to belch syndrome, is defined as bothersome inability or impaired ability to belch at least three days per week after excluding organic oesophageal disease, and the speaker stated in the Q&A that there is a decent way of treating these patients with botulinum toxin injections.
- For functional heartburn with high clinical suspicion, the speaker stated he could start a tricyclic antidepressant without pH impedance study, based on clinical history such as constant heartburn unresponsive to PPIs, and the speaker noted in the Q&A that data support prokinetic therapy for some patients with meal-related epigastric pain in the PDS category.

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