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Summary

PH-MII ON PPI FAILS TO PREDICT THE OUTCOME AFTER ANTI-REFLUX SURGERY IN PATIENTS WITH PPI-REFRACTORY GERD

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A 9-year interim analysis of 38 patients with PPI-refractory GERD suggests that symptom association probability on pH-impedance monitoring while on PPI cannot be used to select patients for anti-reflux surgery.

KEY POINTS

- Patients with negative symptom association probability (SAP) on pH-MII while on PPI had 90% treatment success after surgery compared to 35% in SAP-positive patients, with no redo surgeries required in the SAP-negative group versus 41% in the SAP-positive group.
- Among 38 patients with persistent GERD symptoms despite twice-daily PPI for at least 3 months who underwent anti-reflux surgery, 66% reported treatment success at mean 9-year follow-up using VISICK scores.
- The proportion of patients with treatment success, failure, and redo surgery differed significantly between SAP-based groups ($p<0.0001$), with SAP-negative patients having significantly higher success rates.
- Indications for redo surgery in the SAP-positive group were intrathoracic migration (5/7 patients) and persisting dysphagia (2/7 patients).

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