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Summary

HIGH RESOLUTION ESOPHAGEAL MANOMETRY (HREM) - UPRIGHT OR SUPINE, IS THERE A DIFFERENCE?

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Oesophagus

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A retrospective study of 104 patients found that high resolution esophageal manometry performed in upright position showed 98.1% management concordance with conventional supine testing despite lower IRP and DCI values.

KEY POINTS

- Upright HREM showed consistently lower median IRP (6.0 vs 8.7 mmHg, p<0.01) and mean DCI (1463 vs 1864 mmHg/cm/sec, p=0.014) compared to supine position across all 104 cases.
- Final HREM diagnosis concordance between upright and supine positions was 81.7%, with management similarity concordance reaching 98.1%.
- Only 2 of 104 cases showed significant diagnostic discordance (normal vs EGJ-OO; hypercontractile vs normal), while 17 cases had minor discordance (normal vs ineffective esophageal motility) with no major clinical impact.
- The authors conclude that upright position may be considered a more physiological approach for patients unable to perform HREM in supine position, particularly elderly patients at aspiration risk.

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