ESOPHAGEAL FUNCTION IMPROVES POST-LUNG TRANSPLANTATION IN PATIENTS WITH RESTRICTIVE BUT NOT OBSTRUCTIVE DISEASE

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Esophageal motility changes after lung transplantation differ between restrictive and obstructive lung disease patients, with restrictive disease patients showing greater improvement in motility patterns and acid exposure.

KEY POINTS

- In 57 patients undergoing lung transplantation, those with restrictive disease (n=40) were more likely to retain normal motility or change from abnormal to normal motility post-transplant (60% with abnormal motility normalized) compared to obstructive disease patients (n=17, only 12.5% normalized; p=0.07).
- Patients with restrictive disease showed significant improvement in acid exposure time post-transplant (2.4 to 1.7; p=0.05) and increased mean nocturnal baseline impedance (1750 to 2480 ohms; p=0.002), while obstructive disease patients showed no significant change in either measure.
- Before transplant, 38% of restrictive disease patients and 47% of obstructive disease patients exhibited abnormal esophageal motility, with esophagogastric junction outflow obstruction and ineffective esophageal motility being the most common diagnoses.
- This prospective study using high-resolution impedance manometry and 24-hour pH monitoring suggests that underlying lung disease type influences post-transplant esophageal outcomes, though long-term outcome data are needed.

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