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# A new surgery for heartburn

It was first done in Argentina, in a patient of 36 years who managed to leave antacids

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### РНОТО



Diego Lanzi, along with his family, one month after surgery Photo: Sonia Suarez

# Sebastian A. Rivers THE NATION

In the late eighties inhibitor drugs called proton pump revolutionized the treatment of gastroesophageal reflux, a condition best known by its cardinal symptoms: heartburn. But although their use still provides relief to about 90% of those taking these drugs, it is a treatment that is for life, something that not all patients tolerate or maintain.

"I had to take medicine twice daily before each meal, and I improved symptoms. But I'm not very stable to take medication, I have forgotten and also very social life: often not at home and not always pills was over. I did not want to be tied for life to take a pill, "Lanci told Diego, an employee of 36 years.

On November 5, Diego was put in the Favaloro Foundation to a new intervention for the treatment of

gastroesophageal reflux-transoral fundoplication, which seeks to offer patients in drug treatment can control symptoms without medication.

Diego is the first Argentine to be treated patient by this still experimental procedure, requires no incisions in the skin, as the instrument enters the digestive tract through the mouth. The intervention seeks to become an option for patients who do not want to take medication for life, but in whom laparoscopic surgery usually performed is considered too invasive.

"There is a group of patients who have significant reflux, but in which no surgery is warranted. These patients are those who could benefit from this endoscopic surgery," said Dr. Adolfo Badaloni, director of the Surgery Program esophagogastric Favaloro Foundation.

"The most appropriate patient for this treatment is the patient who relies on medication to avoid symptoms," said Dr. Blair Jobe, professor of surgery at the University of Pittsburgh, USA, who visited Argentina to attend the surgery Diego.

Jobe said another reason that has led to the search for surgical alternatives, but minimally invasive to drugs:

"We are seeing that the medication impairs absorption of calcium, and has suggested a link between chronic use of pump inhibitors proton and a higher incidence of hip fractures.

#### Rebuild the barrier

"Gastroesophageal reflux is a disease that is caused by the passage of stomach contents into the esophagus-defined Badaloni doctor. At the junction of the esophagus and stomach is a valve that, if incompetent, allows the passage of stomach contents the esophagus, which is not accustomed to being in contact with acids and is injured."

Drug treatment aims to reduce acid production, while the surgery aims to reconstruct the natural barrier that prevents stomach contents leak. This is usually done laparoscopically, which involves making small incisions in the patient's abdomen to insert the surgical instruments.

"This new alternative endoscopic [see illustration] works through natural orifices, such as the mouth, thereby avoiding incisions," Dr. Alexander Nieponice, program director of Minimally Invasive Esophageal-Gastric Favaloro Foundation, which along with chief of gastroenterology at the institution, Fabio Nachman, participated in the surgery Diego. Beyond the cosmetic appearance that derives from not making incisions, the postoperative period is much lighter and faster recovery."

Diego proves it. "The day after surgery, he was at home," he said. Today is following a diet that is indicated in these patients, to not force the stomach in the weeks after surgery. "The diet I came barbaric: surgery started with 75 kilos, and I'm 65."

Beyond this benefit anecdotal Diego recovery has been excellent. He managed to leave the drugs, told Nieponice, which warned that this treatment is not useful for patients with hiatal hernia, a condition sometimes associated with gastroesophageal reflux.

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06.12.09 **23:26**  For d\_milenkovitch: Surely you are not a doctor or psychiatrist. Is critical. The acidity is caused by multiple reasons, and reflux, which is another thing, implies the impossibility of the locking mechanism of the junction between the stomach and the esophagus to function properly. And often it is anatomical. It is necessary to produce more acid, as you would seem to suggest the theme of the psychic. With the normal acid and diet (the gift was ...) still occurs. So I think it would have to read a little more. Besides, this is not an "editorial" but a note simply "informative", which warns that an "experimental technique" which is very valuable. There is even an "scientific". They would have to search the journals of gastroenterology. I am a doctor and reflux and I analyze a lot. It's not like you puts it, with both upper and indignacion.Lea so a little before you speak so stilted.

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06.12.09 **17:05**  A d\_milenkovith: if it is true that the note may have been too simple in its presentation, the same can be said of the recommendation to send any patient who comes up with heartburn or reflux symptoms sent him to a psychiatrist!! Please!!

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06.12.09 **11:41**  I'm interested in art. Forista d\_milenkovich your comment, it seemed reasonable, in my case and noticed that it also increased in recent times, as argued by advancing age, and started taking antacids, my GP does not give you more important. Where can I read more about that? Thank you very much

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