

## Study compares 2 nonsurgical treatments for reflux disease

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Two non-surgical, non-pharmacological treatments for gastroesophageal reflux disease (GERD) both appear effective in reducing medication use and improving voice and swallowing symptoms, according to a report in the January issue of *Archives of Surgery*, one of the JAMA/Archives journals. One type of therapy also appears effective for reducing heartburn and cough, whereas the other may be associated with a reduction in regurgitation.

GERD—a condition in which acid from the stomach backs up into the esophagus—is typically treated first with medications such as proton pump inhibitors, according to background information in the article. However, it may be difficult for patients to comply with or afford long-term drug therapy, and GERD returns more than 80 percent of the time when medication is discontinued. Surgical options have been available since the 1990s, and more recently, endoluminal therapies that involve entering through the body's natural passages to repair the underlying causes of GERD have become available.

One endoluminal therapy, full-thickness plication, involves using a long, narrow tool known as an endoscope to tighten the junction between the esophagus and the stomach with sutures. A second, radiofrequency therapy, delivers energy waves to the muscles of the esophagus and stomach, purportedly improving the function of the valve between the esophagus and the stomach. Louis O. Jeansonne IV, M.D., then of Emory University School of Medicine, Atlanta, and now at Ochsner Medical Center, Baton Rouge, La., and colleagues compared the

effectiveness of these two therapies in 126 patients treated for GERD between 2002 and 2006.

For the first two years of the study, only radiofrequency was available; for the remainder, treatment decisions were based on patient preference, the surgeon's judgment and anatomical factors. A total of 68 patients underwent radiofrequency treatment and 58 underwent full-thickness plication. Patients were asked to report their medication use and rate their GERD symptoms before and after the procedure.

After an average of six months, follow-up data was obtained for 51 percent of patients. Among those who underwent radiofrequency treatment, on follow-up the percentage with moderate to severe heartburn decreased from 55 percent to 22 percent; medication use decreased from 84 percent to 50 percent; and decreases were also seen for swallowing difficulties, voice symptoms and cough. In the full-thickness plication group, moderate to severe heartburn decreased from 53 percent to 43 percent of patients; medication use decreased from 95 percent to 43 percent; and decreases were seen for regurgitation, voice symptoms and swallowing difficulties. There were no changes in chest pain or asthma symptoms after treatment in either group.

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