MEETING ABSTRACT



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Laparoscopic Toupet fundoplication: a alternative chance in elderly patients with GERD

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Background

Gastro-esophageal reflux disease (GERD) is one of the most frequent diseases of the upper gastro-enteric tract and incidence increases during lifetime [1]. In elderly patients [2] with a good LES basal tone and good peristalsis, evaluated with esophageal manometry, and even with a long exposure time fraction and a correlation between episodes of reflux and symptoms (SAP - Symptom Association Probability), evaluated with 24h pHmetry [3], severe and refractory symptoms or intolerance to a conservative treatment, had a good response after a laparoscopic 270° fundoplication (Toupet technique); Toupet's technique seems to offer good results such as Nissen-Rossetti fundoplication in terms of symptom control in a short-term evaluation [4-7].

Materials and methods

We drove a prospective study in a period from March 2012 to March 2013, in which 13 elderly patients were treated with VLP Toupet fundoplication. Of these, 11 (84,6%) completed the follow up to six months, while 2 (16,4%) have not respected the post-operative protocol.

The inclusion criteria for the study were:

- 1. Patient age > 65
- 2. Long-term diagnosis of GERD
- 3. Severe symptoms with conservative treatment
- 4. Good LES basal tone and good esophageal motility

The patients have been preliminarily submitted to a 24 hours pH-metry and to an esophageal manometry.

The study foresaw a follow up of six months, that consisted in the repetition of 24 hours pH-metry and manometry one month and six months after the surgical intervention.

Results and discussion

The results of study shows that after the intervention there are appreciable improvements, because all patients refer a meaningful decrease of symptoms severity, without post-operative disphagia. No manometric alterations and improvements of 24h ph-matric values were present in all cases.

Laparoscopic Toupet fundoplication seems to be a good alternative in selected elderly patients with severe symptoms of GERD, offering similar results of Nissen-Rossetti fundoplication [7].

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