

CASE OF THE WEEK

LIFE WINS

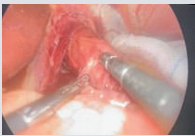


Dr. Ankur Mishra

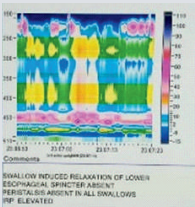
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Esophageal Mobilization



Myotomy Intraop



Manometry Reports - Achalasia Type 2



Myotomy

TOPIC: MINIMAL INVASIVE SURGERY FOR ACHALASIA CARDIA

38 year male patient came with complain of difficulty in swallowing both for liquids and solids , more for liquids along with nausea and vomiting , so he underwent UGI endoscopy by Dr Piyush Marudwar and since the scope was not negotiated beyond Gastro Esophageal junction , so further his manometry was done and was diagnosed as a case of TYPE II ACHALASIA CARDIA , after all pre-op investigations and Physician Fitness He underwent LAPAROSCOPIC HELLER'S MYOTOMY AND DOR'S FUNDOPLICATIONS , an intraop check endoscopy was also done to check adequacy of myotomy , postoperatively patient recovered well and was started orally liquids very next day followed by soft diet and was discharged on Post op day 3. On follow up OPD post op day 12 patient was asymptomatic and was able to swallow both liquids and solids easily.

Hence forth it's advised for these kind of patient to get investigated promptly so as to get to a proper diagnosis and management accordingly.

Minimally Invasive Surgery- Achalasia Cardia

The surgery used to treat achalasia is called LAPAROSCOPIC ESOPHAGOMYOTOMY or LAPAROSCOPIC HELLER MYOTOMY. In this minimally invasive surgery, a thin, telescopic-like instrument called an endoscope is inserted through a small incision. The endoscope is connected to a tiny video camera – smaller than a dime –that projects a view of the operative site onto video monitors located in the operating room. In this operation, the muscle fibers of the LES are cut. The addition of another procedure called a partial fundoplication helps prevent gastroesophageal reflux, a side effect of the Heller myotomy procedure.

Achalasia is a rare disorder in which damaged nerves in your esophagus prevent it from working as it should. Muscles at the lower end of your esophagus fail to allow food to enter your stomach. Symptoms include trouble swallowing, heartburn and chest pain. Treatment includes both nonsurgical (Botox injections, balloon dilation, medicines) and surgical options.

Manometry: This test measures the timing and strength of your esophageal muscle contractions and relaxation of the lower esophageal sphincter (LES). Failure of the LES to relax in response to swallowing and lack of muscle contractions along the walls of the esophagus is a positive test for achalasia. This is the “gold standard” test for diagnosing achalasia.