

Are manometric findings different between the patients with erosive and nonerosive disease?

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Gastroesophageal reflux disease (GERD) is defined as the pathological retrograde movement of gastric contents into the esophagus. Various esophageal motility disturbances which may be important in reflux are observed in patients with GERD. The main esophageal motility disorder in these patients is ineffective esophageal motility (IEM). Increased acid clearance time and IEM have been shown to be strongly associated with isolated proximal reflux. However, there are no data that conclusively link motility disorders with isolated distal reflux (IDR).

A research team, led by Dr. Yasemin Ozin from Turkey Yuksek Ihtisas Training and Research Hospital investigated manometric measurements in patients with IDR and compare the findings in individuals with and without erosive esophagitis.

Their study will be published on November 21, 2009 in the *World Journal of Gastroenterology*. In their study, patients with symptoms of GERD were evaluated with esophageal manometry, 24-h ambulatory pH monitoring, and upper gastrointestinal endoscopy. Among patients with isolated distal reflux, the manometric findings of patients who had erosive disease and non-erosive disease were compared. There were no significant differences between the isolated distal reflux group and control group with respect to age, [body mass index](#), and esophageal body contraction amplitude. Mean lower esophageal sphincter pressure was significantly higher in the control group. There were no differences

between the erosive reflux disease and non-erosive reflux disease subgroups with respect to mean esophageal body contraction amplitude (EBCA), lower esophageal sphincter pressure, or DeMeester score. However, IEM was observed only in patients with erosive reflux disease.

The authors provided more insight into the pathophysiology of reflux disease. The finding of very low EBCA being observed only in patients with erosive disease might be helpful in identifying these patients.

More information: Ozin Y, Dagli U, Kuran S, Sahin B. Manometric findings in patients with isolated distal gastroesophageal reflux. *World J Gastroenterol* 2009; 15(43): 5461-5464, <http://www.wjgnet.com/1007-9327/15/5461.asp>

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