

Laparoscopic Anti-Reflux Surgery

Heartburn is described as a harsh, burning sensation in the area in between the ribs or just below the neck. The feeling may radiate through the chest and into the throat and neck. In gastroesophageal reflux disease (GERD), stomach acid washes up into the oesophagus. GERD can harm the lining of the esophagus and cause what many people call “heartburn” or “acid indigestion.” Some people with GERD may also have a cough, a sore throat, breathing problems, trouble swallowing, or bad breath.

WHAT CAUSES GERD?

At the lower end of the oesophagus is a small ring of muscle called the lower oesophageal sphincter (LES). Normally, the LES closes immediately after swallowing to prevent back-up of stomach juices, which have a high acid content, into the oesophagus. GERD occurs when the LES does not function properly allowing acid to flow back and burn the lower oesophagus.

WHAT CONTRIBUTES TO GERD?

Some people are born with a naturally weak sphincter (LES). For others, however, fatty and spicy foods, certain types of medication, tight clothing, smoking, drinking alcohol, vigorous exercise or changes in body position (bending over or lying down) may cause the LES to relax, causing reflux. A hiatal hernia (a common term for GERD) may be present in many patients who suffer from GERD, but may not cause symptoms of heartburn.

HOW IS GERD TREATED?

GERD is generally treated in three progressive steps:

1. LIFE STYLE CHANGES

Losing weight, reducing or eliminating smoking and alcohol consumption, and altering eating and sleeping patterns can also help.

2. DRUG THERAPY

If symptoms persist after these life style changes, drug therapy like antacids may be required.

3. SURGERY

Patients who do not respond well to lifestyle changes or medications, those who continually require medications to control their symptoms and those who have complications from GERD may benefit from a surgical procedure. Surgery performed is called Laparoscopic Fundoplication.

