



LAP NISSEM OVER AN ENDOSCOPIC PPLICATION. NOT THAT EASY

Galvao Neto, Manoel. Ramos, Almino Cardoso. Galvao, Manoela. Carlo, Andrey

Gastro Obeso Center – Sao Paulo – Brazil

Barata Ribeiro Street # 237 – Offices 83/84. ZIP 01308-000. Tel/Fax +- 55 11321112-00

BACKGROUND: The endoscopic treatment of Gastro Esophageal Reflux Disease (GERD) is in the highlights but its effectiveness is still questioned. Also it's complications are not yet all defined. We present a case in with a endoscopic Full-Thickness plication (Plicator device made by NDO company) was done in attempt to treat a patient with chronic GERD with more them 8 treatment with PPI for over 8 weeks each with relapses in symptoms and esophagitis – Last endoscopy prior the endoscopic treatment had a grade II esophagitis in Los Angeles classification without hiatus hernia). After the procedure the patient complain for 12h hours of moderate abdominal and chest pain witch stops spontaneously. After 11 months the patient begin to complain of heartburn and regurgitation and a new endoscopy reveals the same picture previous to the procedure. New pHmetry with pathologic supine acid reflux and a manometry with an hipotensive lower esophageal esfincter pressure also were similar to pre-op tests. So the patient was referred to us and we indicate a Lap Nissem. **Method:** A five trocar lap Nissem access was initiated by a senior assistant and due to a “modified G-E junction anatomy” the Chief Surgeon was request to continue the operation. What we find at the operation was a fundoplication that like a finger, pointed and enter in to the diaphragm, crossing the pleura achieving the thoracic esophagus. The dissection as to be show in the video was one even it not the worst and most difficult faced to a team with more than 2000 lap Nissem done. At the end we have to transect the plication removing the scar tissue and suturing the holes in the esophagus and gastric fundus. Inside the esophagic wall we find , the Prolene stitch and the two PTFE cushion. The esophagic wall was covered by a Nissem fundoplication and drain. The pos-operative course went without any regards. **CONCLUSION:** Complications of endoscopic GERD treatment can be difficult to treat and deserves better observation