Boston Medical Pioneering New Incisionless Surgery

Boston Medical Center (BMC) surgeons are now offering patients an incisionless alternative to laparoscopic and traditional surgery in the treatment of acid reflux, or GERD. Using a new procedure known as EsophyX TIF (Transoral Incisionless Fundaplication), surgeons can repair or reconstruct the valve between the esophagus and stomach, effectively stopping GERD. BMC is the only hospital in New England offering this new treatment.

GERD, or chronic heartburn, can be severe enough in some instances to damage the esophagus. This level of the ailment impacts nearly 14 million Americans on a daily basis.

Using the EsophyX, BMC surgeons pass instruments and an endoscope through a patient's mouth and tighten or repair the weakened valve without making any incisions.

“Compared to laparoscopic or traditional surgery, patients treated via the endoscope have required less anesthesia and experienced less complication rates, shorter hospital stays and faster recovery, reduced patient discomfort, and no need for incisions,” said Miguel Burch, MD, Co-Director of Esophageal and Acid Reflux Disorders, Center for Digestive Disorders at BMC. “Patients are typically able to return home and to normal activities the day following the procedure,” he added.

Complications associated with untreated GERD are well documented and can have a significant impact on quality of life and, in extreme cases, life expectancy. Esophagitis can quickly become a chronic condition, and if the damage is severe, esophageal ulcers can form. If left untreated, a potentially premalignant condition, Barrett's esophagus, can develop and in a small percentage of patients this can progress to esophageal cancer.

“While over-the-counter medications may alleviate the symptoms, by decreasing production of stomach acid, they don't solve the anatomical problem and reflux (without acid) can still continue causing injury but without symptoms to warn the patient,” said Hiran Fernando, MD, a cardiothoracic surgeon and director of minimally invasive thoracic surgery at BMC. “For patients who are dissatisfied with pharmaceutical therapies and are concerned about the long-term effects of over-the counter medications, this procedure may be the answer,” added Fernando.

According to the BMC surgeons, anatomical correction is key to long-term prevention of GERD and disease progression. Unfortunately, they say even laparoscopic surgical repair can be invasive and may be associated with side effects like gas bloat and difficulty swallowing.

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