

OESO Newsletter – March 2022

Message to the members of OESO,
and to all those who have interest in Esophagology



The OESO-SEMPIRE **VIRTUAL EDUCATIONAL CHANNEL** **18th meeting**

From **Brigham and Women's Hospital /**
VA Boston Healthcare / Harvard Medical School

Hosted by: **Hiroshi Mashimo**, MD, MS, PhD
Director, GI Motility and Advancing Imaging

Thursday, March 24, 2022

- **North America, East coast**
6:30 – 8 am
- **Europe CET**
Paris: 11.30 am – 1 pm
- **North America:**
West Coast: 3.30 – 5 am
- **South America:**
São Paulo, 7.30 – 9 am
- **Africa:** Bomet, Kenya,
13.30 – 3 pm
- **Malaysia,** Kuala Lumpur:
6.30 – 8 pm
- **Australia:** Melbourne,
9.30 – 11 pm

- Zoom technology applied



GIST OF THE 1ST CASE

Case 1:

a 78-year-old male presenting with dysphagia found to have type II achalasia managed with dilation.

- Patient presented with recurrent dysphagia.
- Reportedly had a diagnosis of achalasia at an outside hospital in the past, managed with repeated Botox injections over a few years.
- We repeated high-resolution manometry and timed barium esophagram, and findings were consistent with type II achalasia.
- He underwent an upper endoscopy with functional luminal imaging probe (FLIP) planimetry that showed low distensibility at the lower esophageal sphincter and absent contractility to volumetric distention in the esophageal body.
- Dilation at the lower esophageal sphincter was performed using the EsoFLIP 30-mm balloon.
- A deep, long linear tear was noted post-dilation concerning for full thickness tear/perforation.
- An esophageal stent was immediately placed to cover the linear tear.
- Post-procedure, the patient was observed in the hospital for two days. He remained stable and was able to advance his diet to full liquid prior to discharge without requiring surgery.

Presentation of the case: Mayssan **Muftah**, MD, Gastroenterology Fellow

Discussion:

- Assessment of patient with achalasia presenting with recurrent dysphagia.
- The anatomy, physiology and physics relevant to achalasia evaluation and management.
- Treatment of patients with achalasia and how to choose therapy.
- Surgical and endoscopic management of post-dilation complications.

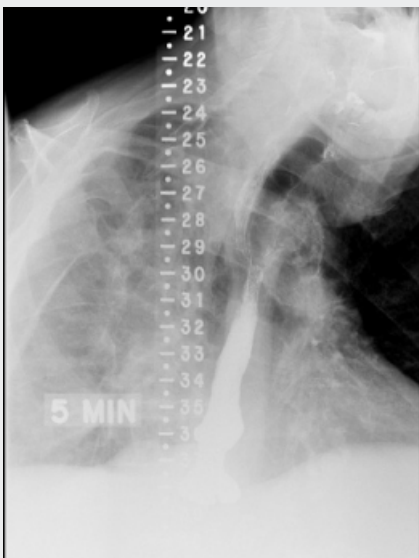


Figure 1: Time barium swallow demonstrating retained column of barium at 5 minutes

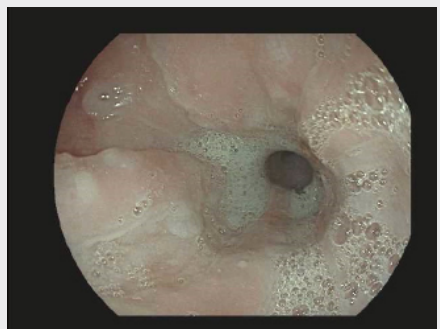


Figure 2: Lower esophagus at the time of endoscopy

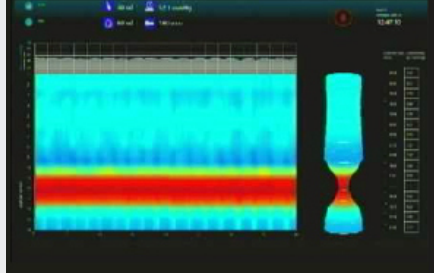


Figure 3: EndoFLIP at 60mL demonstrating low distensibility, absent contractility

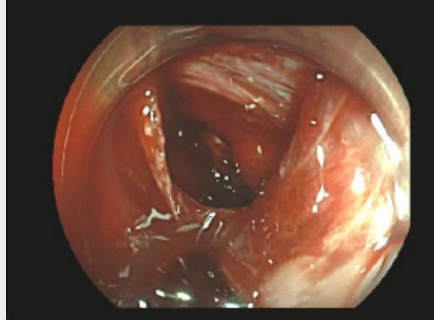


Figure 4: Lower esophagus following EsoFLIP dilation demonstrating full thickness tear



Figure 5: Esophagus following stent placement



Figure 6: Upper GI Series following stent placement



Figure 7: Endoscopic stent removal

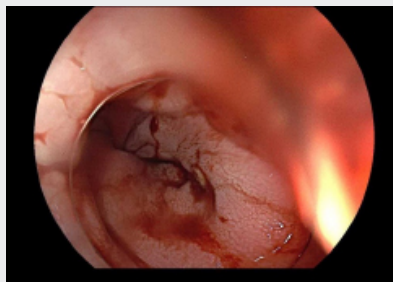


Figure 8: Lower esophagus at follow up endoscopy following stent removal

GIST OF THE 2ND CASE

Case 2:

a 55 year-old with interstitial lung disease referred for pre-surgical assessment for lung transplantation.

- Patient was diagnosed with interstitial lung disease with declining pulmonary function over the years.
- He underwent comprehensive evaluation for lung transplantation.
- He denied esophageal symptoms, including no heartburn, reflux, regurgitation, or dysphagia.
- A high-resolution esophageal manometry was performed as part of routine pre-transplantation esophageal assessment.

Presentation of the case: Mayssan **Muftah**, MD, Gastroenterology Fellow

Discussion:

- The role of esophageal testing in patients with advanced lung disease.
- Options and selection of diagnostic testing for esophageal assessment in lung transplant patients.
- Management strategies for esophageal dysfunction and reflux to optimize pulmonary and transplant outcomes.

Panel for discussion (all members from Harvard Medical School):

- Jennifer **Cai** (Assoc. Director, GI Motility and Physiology)
- Walter **Chan** (Director, GI Motility and Physiology)
- Wai-Kit **Lo** (Assoc. Director, GI Motility)
- Hiroshi **Mashimo** (Director, GI Motility and Advanced Imaging)
- Mayssan **Muftah** (Gastroenterology Fellow)
- Ann DeBord **Smith** (Chief, Bariatric Surgery)
- Jon **Wee** (Section Chief, Esophageal Surgery)



Registration is free, but mandatory:

Free registration



*Eighteen Pilot Centers worldwide are currently listed in the network of the OESO-SEMPIRE Platform of Excellence in Esophagology to take part in the program of the **OESO Virtual Educational Channel** in Esophagology. Such a program is in line with true multi-disciplinarity, the essence of OESO since its creation, and the mission defined by UNESCO in the **Chair of Digital Education** attributed in 2018, at the University of Geneva, to the OESO Foundation.*



The first seventeen "Staff meeting discussions" were organized in

- **2020:** May 28 (Pilot Center of Milan), July 22 (Pilot Center of Stanford), October 3 (Pilot Center of Bomet, Kenya), October 29 (Pilot Center of Beijing), December 10 (Pilot Center of Geneva),
- **2021:** January 29 (Pilot Center of Melbourne), February 25 (Pilot Center of Bordeaux), March 19 (Pilot Center of Stanford), April 15 (Pilot Center of Paris), May 26 (Pilot Center of Milan), June 23 (Pilot Center of Sao Paulo), August 21 (Asian Pacific Digestive Week), October 19 (Pilot Center of Mainz), November 22 (Pilot Center of Bordeaux), December 9 (Pilot Center of Geneva),
- **2022:** January 20 (Pilot Center of Kota Bharu) and February 22 (Pilot Centers of Beijing, Shanghai and Guangzhou).



- **Wherever you are in the world,**
- **Whatever your specialty,**
- **Whatever your level,**

the 18th clinical case of the OESO-SEMPIRE Platform will afford you the opportunity to participate in a global multidisciplinary staff meeting dedicated to 2 challenging cases of esophagology.

It will involve specialists in various disciplines, and participants from any country can connect to the discussions.

Looking forward to seeing you soon!

Robert Giuli, MD, FACS

Professor of Surgery

Founder & Deputy Executive Director of OESO

The next clinical case coming up for discussion will be proposed in April by the Pilot Center of Melbourne, headed by Prof. Matthew Read.

Date and details on time will be announced on the OESO website and in next Newsletters.

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