HKUMed successfully performed Asia’s first magnetic sphincter augmentation for gastroesophageal reflux disease

Press Conference
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Speakers

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Prevalence of Gastroesophageal Reflux Disease in Asia is increasing

Richter et al., *Gastroenterology*, 2018

Prevalence relatively low in SE Asia

Rising local prevalence of GERD

Tan et al., *Clin Gastroenterol*, 2016
Treatment Options

65-70% PPI satisfactory

25-30% PPI unsatisfactory

Surgery 1-5%

Aziz et al. Gastroenterology 2016;150:1368–1379

Esophageal Sphincter Device for Gastroesophageal Reflux Disease

Robert A. Ganz, M.D., Jeffrey H. Peters, M.D., Santiago Horgan, M.D., Willem A. Bernelman, M.D., Ph.D., Christy M. Dunst, M.D., Steven A. Edmundowicz, M.D., John C. Lipham, M.D., James D. Luketich, M.D., W. Scott Melvin, M.D., Brant K. Oelschlager, M.D., Steven C. Schlack-Haerer, M.D., C. Daniel Smith, M.D., Christopher C. Smith, M.D., Dan Dunn, M.D., and Paul A. Taiganides, M.D.
• Acid reflux and heartburn for 6 years
• 24 hours acid exposure time
  14.5% → 1.5%  
  (5 months after surgery)
• Symptoms & drug free
• Chronic acid reflux and heartburn for more than 10 years
  • Worsen symptoms at night, lying supine and after full meal, waking patient up
  • 80-90% responsive to anti-reflux medication
• Endoscopy: esophagitis and hiatus hernia
• Does not want long term medication
Most Recent Magnetic Sphincter Augmentation
November 2019

- Visited pre-admission anaesthetic clinic
- Admitted 7:00am on day of operation
- Operation started at 1:00pm
- Soft diet after surgery
- Discharged around 7:00pm first day after surgery
Conclusion

• **Increasing prevalence** of GERD in HK
• **Surgery is one of the treatment options for patients who**
  • Want to avoid long term medication
  • Have refractory symptoms & complications
• **Magnetic sphincter augmentation as an alternative**
  • Comparable results with fundoplication
  • Less bloating and allow to belch
  • No alteration of stomach anatomy
  • Simple procedure. Quick Recovery
Question & Answer