

9.2.1.4.C Achalasia with DE in a 75-year-old patient

Medical History: For months, the patient suffered increasingly from dysphagia and odynophagia (Medical History: CHD, diabetes mellitus II). In the gastroscopy a contraction due to constricted LES was seen without relevant relaxation, so that the suspect diagnosis of achalasia resulted. This was confirmed in the HR-manometry that was performed. The subclassification revealed achalasia with pan-esophageal pressure increase (Type II). In addition to the motility disorder a large axial hiatal hernia was detected in the HR-manometry. A balloon dilatation of the LES was performed, which yielded a good result with only small mucosal tears at the Z-line. Following intervention, the patient was asymptomatic and was discharged with a 4-week PPI therapy.

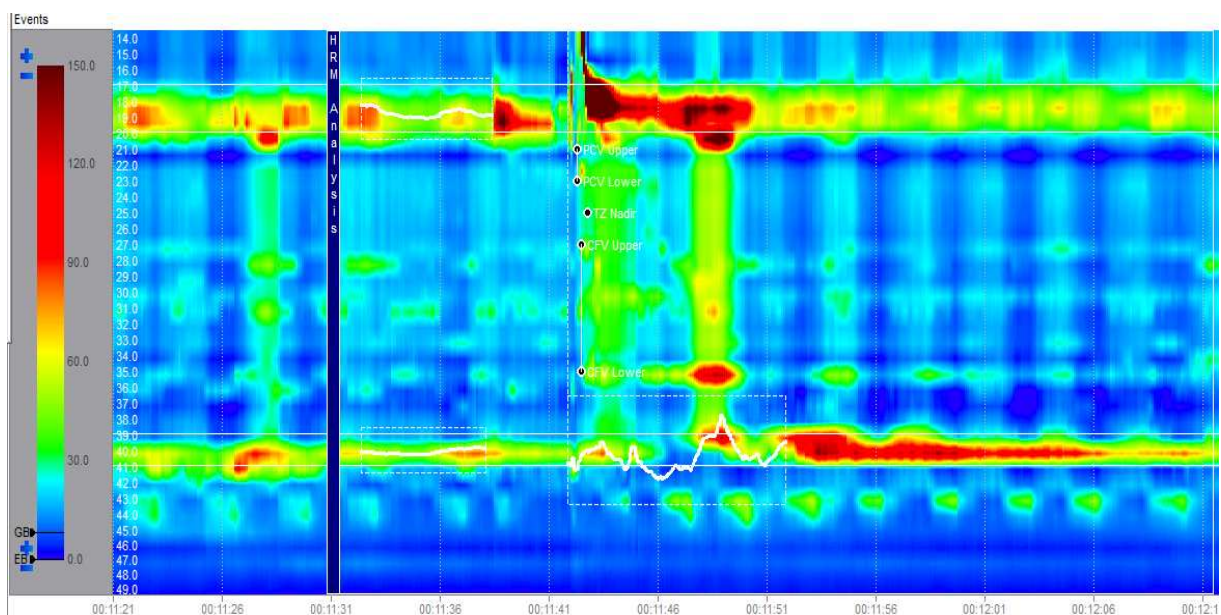


Figure 41 Achalasia with pan-esophageal pressure increase (Type II):

Image Description:

The resting pressure of the LES (39-41 cm) is increased. The swallow-induced relaxation is incomplete, there is also a separation of the LES and the diaphragm (43-45 cm; hernia type IIIb). In the tubular esophagus (21-39 cm) a simultaneous pan-esophageal pressure increase during the wet swallow is seen after swallowing. This is followed by a post-contraction in the UES, which causes a secondary peristalsis with pan-esophageal DE. This leads to a typical longitudinal contraction (shortening) of the esophagus. Due to the lack of peristalsis certain analytical values are not meaningful (see Chapter 8). The breathing-dependent pressure columns in this picture on the side of the tubular esophagus, which pull through the entire examination, are striking. The UES (17-21 cm) shows a normal resting tone with normal relaxation.

Marker Info	
Start Time (hh:mm:ss)	00:11:31
End Time (hh:mm:ss)	00:12:11
UES Resting Pressure (mmHg)	58.7
UES Residual Pressure (mmHg)	18.8
UES Percent Relaxation (%)	67.9
UES Relaxation Time to Nadir (ms)	300.0
UES Relaxation Time (ms)	500.0
Esophageal Baseline (mmHg)	0.0
HRM Classification	Absent Peristalsis
Proximal Contractile Velocity (cm/s)	-
Proximal Contractile Integral (mmHg*s*cm)	282.4
Mean Amplitude Pressure Proximal (mmHg)	58.6
Transition Zone Nadir Pressure (mmHg)	29.0
Contractile Front Velocity (distal) (cm/s)	-
Distal Contractile Integral (mmHg*s*cm)	1585.7
Intra Bolus Pressure (mmHg)	18.8
Integrated Relaxation Pressure (mmHg)	36.2
Mean Amplitude Pressure Distal (mmHg)	66.7
Max Amplitude Pressure (mmHg)	191.3
LES Resting Pressure (mmHg)	55.0
LES Residual Pressure (mmHg)	19.1
LES Percent Relaxation (%)	65.2
Gastric Baseline (mmHg)	8.1