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Achalasia

This is an uncommon disease which occurs when the lower oesophagus fails to open fully to the passage of food and the oesophagus loses its muscular tone. Patients present with progressive dysphagia (problems with swallowing). The diagnosis is made after investigations which include gastroscopy, Barium meal and Manometry (pressure studies). The treatment of achalasia depends on the stage of the disease and the individual patient. In general patients with early disease have better long term results.

Three main methods of treatment exist:

1. Botox injection via gastroscopy (repeated treatments)
2. Forceful dilation of the lower oesophagus (risk perforation)
3. Surgery, laparoscopic Heller's cardiomyotomy

Laparoscopic surgery is performed through small incisions.

The lower oesophageal and upper stomach muscle is divided down to lining (mucosa). This removes the obstruction causing muscular spasm. An antireflux procedure is also performed to prevent acid reflux.

Potential complications include:

Perforation, bleeding, intra abdominal damage and later recurrence of the disease.

Mr Armstrong has performed 100 laparoscopic Heller's operations with minimal morbidity.