



## AB058. SOH22ABS074. Management experiences of post-gastrectomy severe alkaline reflux oesophagitis

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**Background:** Alkaline reflux oesophagitis is a recognized complication of procedures that compromise the lower oesophageal sphincter (LES), including gastrectomy. Incidence of reflux is dependent on the reconstructive procedure with Roux-en-Y esophagojejunostomy commonly accepted as the optimal method. The authors report their experience of 6 patients who underwent remedial intervention for severe alkaline reflux esophagitis following gastric surgery.

**Methods:** A retrospective review of 6 patients who had undergone a previous gastric procedure and developed symptoms of gastroesophageal reflux disease, over a 6-year period (2014–2020). Reflux symptoms were diagnosed by clinical history, radiology, endoscopy and esophageal manometry prior to proceeding to surgical reflux control. Post-operative outcomes following anti-reflux surgery were assessed by means of serial outpatient assessments and endoscopy.

**Results:** Six patients were included in this report, 4 males and 2 females with an average age of 73 years (range, 58–91 years). Primary diagnoses encompassed; 4 gastric adenocarcinomas, 1 gastric neuroendocrine tumour and 1 patient with debilitating gastric antral vascular ectasia (GAVE) syndrome. Four patients underwent total gastrectomy and 2 subtotal gastrectomy with Roux-en-Y reconstruction. Onset of post-operative reflux symptoms ranged from 2 weeks to 3 years. Failing medical management, all patients underwent jejunojunal anastomosis and Roux limb length revision with surgical

jejunostomy. At follow up 5 out of 6 patients had some degree of symptom resolution; 3 complete resolution, 2 initial resolution and 1 with unresolved symptoms.

**Conclusions:** Severe alkaline reflux oesophagitis is a recognized complication of gastric procedures compromising the LES. The authors report our experience of managing this complication following gastrectomy with jejunojunal anastomosis and Roux limb length revision, with a majority of patients having improvement in if not complete resolution of reflux symptoms.

**Keywords:** Alkaline reflux oesophagitis; gastrectomy; lower esophageal sphincter; Roux-en-Y; oesophagitis

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### Footnote

*Conflicts of Interest:* The authors have no conflicts of interest to declare.

*Ethical Statement:* The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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