

Title:

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Type II achalasia with post-POEM recovery of esophageal motility

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CASE REPORT

A 54-year-old female with acromegaly due to pituitary macroadenoma presented due to dysphagia for solids. Difficulty in passing in the esophagogastric junction (EGJ) was observed by gastroscopy. A high-resolution esophageal manometry (HRM) was performed due to the suspicion of achalasia, observing the complete absence of motility of the esophageal body, panesophageal pressurization in > 20 % of swallows and integrated relaxation pressure (IRP) of 21 mmHg, confirming the diagnosis of type II achalasia. Peroral endoscopic myotomy (POEM) was performed and the patient presented clinical improvement after the intervention. In the control around one year after the POEM, there was a decrease in IRP, and a remarkable partial recovery of motility in the upper and middle third of the esophagus.

DISCUSSION

Achalasia is an esophageal motor disorder characterized by incomplete relaxation of the lower esophageal sphincter and a complete absence of peristalsis in the

esophageal body. The absence of motility is caused by the loss of the inhibitory neurons of the myenteric plexus, although the accurate etiopathogenesis is still unknown. Therefore, there is no curative treatment and all therapeutic options are symptomatic, aimed to relieve the obstruction of the EGJ. POEM is the newest method.

Absence of motility of the esophageal body in patients with achalasia was believed to be irreversible. Nevertheless, an increasing number of studies describe a partial recovery of motility observed in manometry after POEM, especially in type II achalasia. The exact pathophysiological mechanism of this recovery is still unknown.

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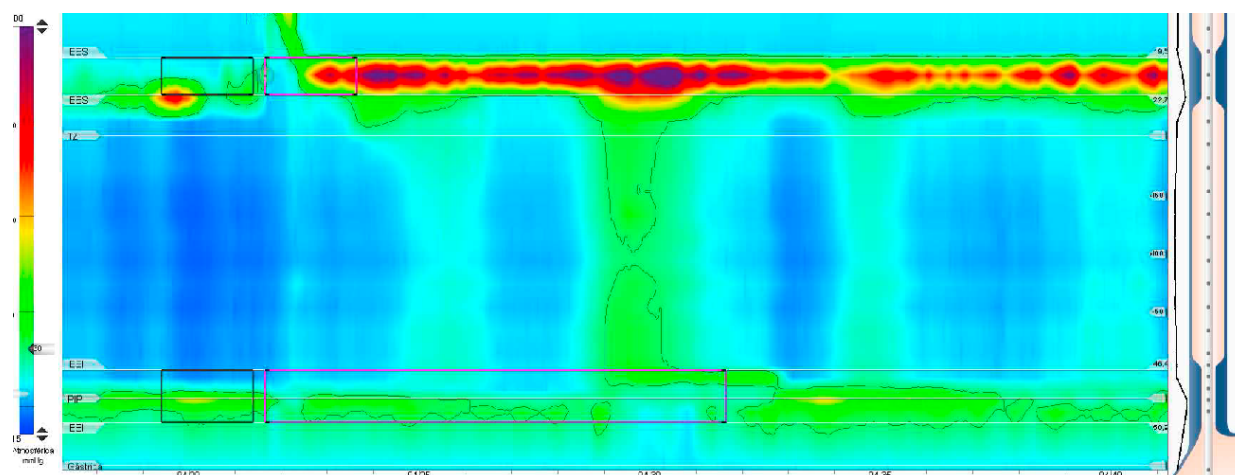


Fig. 1. Before POEM. High-resolution manometry with a diagnosis of type II achalasia: absence of motility, panesophageal pressurization and IRP 21 mmHg.

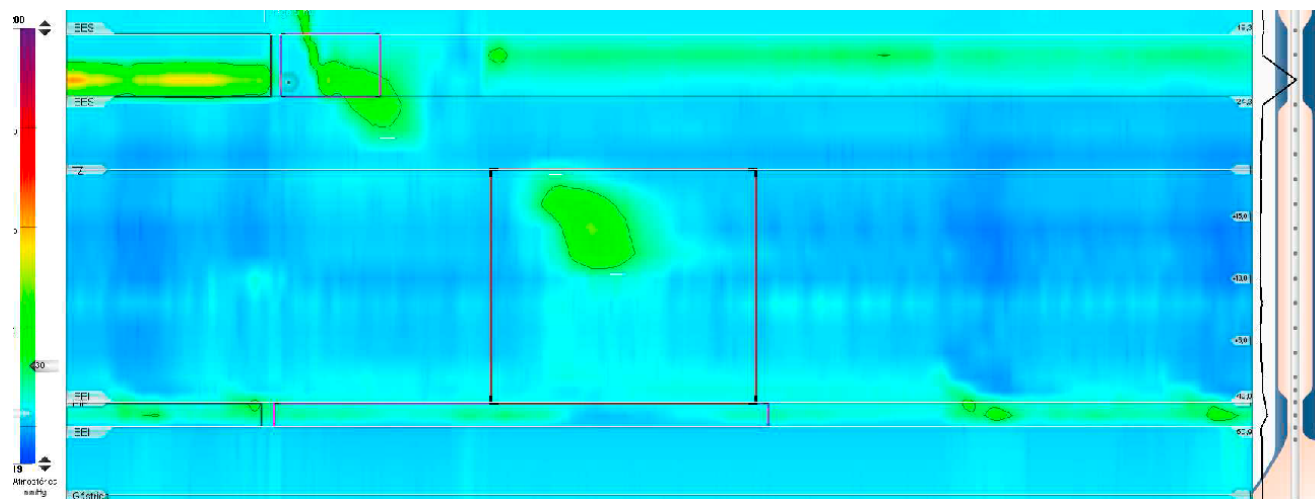


Fig. 2. After POEM. High resolution manometry showing ineffective esophageal motility (partial recovery of motility) after POEM with IRP of 4 mmHg.