



Do I Need Another Endoscopy?

By: J. Patrick Waring, M.D., Digestive Healthcare of Georgia, Piedmont Hospital, Atlanta, GA

549



International Foundation for Gastrointestinal Disorders (www.iffgd.org)

⌚ Reading time: 2 minutes © Copyright 2009 by the International Foundation for Gastrointestinal Disorders

The information in this fact sheet was adapted from the Clinical Corner Section of Digestive Health Matters, 2009; Vol. 18, No 1. Questions and answers in IFFGD's Clinical Corner are available free online to IFFGD members.

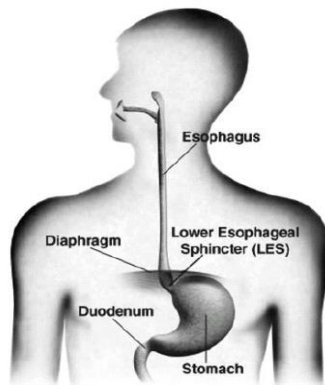
Question – I underwent an endoscopic exam about 1 year ago and was diagnosed with GERD. Do I need another endoscopy? How can I tell if there has been damage to the esophagus?

Answer – This is a very common question in my practice. It is important for someone with chronic heartburn symptoms to have an endoscopy. The most important thing to look for is Barrett's esophagus, a change in the lining of the esophagus that is associated with an increased cancer risk. The endoscopist will also be looking for esophagitis, damage to the lining of the esophagus. The endoscopist may see a hiatal hernia or other anatomic abnormalities.

Patients with Barrett's esophagus should be enrolled in a surveillance program to look for signs of abnormal tissue (dysplasia) or cancer. This is a very slow growing cancer and endoscopies are usually done every 3 years. Patients with esophagitis should have a repeat endoscopy to demonstrate healing. Occasionally, when the esophagitis is healed, one can see Barrett's esophagus.

Patients with no esophagitis and no Barrett's esophagus on their initial endoscopy should not need a repeat exam unless there has been a major change in symptoms. The reason is that if heartburn symptoms are well controlled, it is uncommon to develop Barrett's esophagus.

More importantly, it is extremely *uncommon* to develop Barrett's esophagus and then develop esophageal cancer. If there is no history of esophagitis and your heartburn is controlled with your diet and medications, you can be fairly certain that there is no significant ongoing esophageal injury.



About IFFGD

The International Foundation for Gastrointestinal Disorders (IFFGD) is a 501(c)(3) nonprofit education and research organization. We work to promote awareness, scientific advancement, and improved care for people affected by chronic digestive conditions. Our mission is to inform, assist, and support people affected by gastrointestinal disorders. Founded in 1991, we rely on donors to carry out our mission. Visit our website at: www.iffgd.org or www.aboutGERD.org.

IFFGD

537 Long Point Road, Suite 101
Mt Pleasant, SC 29464

About the Publication

Opinions expressed are an author's own and not necessarily those of the International Foundation for Gastrointestinal Disorders (IFFGD). IFFGD does not guarantee or endorse any product in this publication or any claim made by an author and disclaims all liability relating thereto. This article is in no way intended to replace the knowledge or diagnosis of your healthcare provider. We advise seeing a healthcare provider whenever a health problem arises requiring an expert's care.

For more information, or permission to reprint this article, contact IFFGD by phone at 414-964-1799 or by email at iffgd@iffgd.org.