Long-Term Outcomes Following Laparoscopic Anterior Fundoplication.

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Introduction:
The laparoscopic Nissen fundoplication remains the gold standard treatment for gastro-oesophageal reflux disease (GORD) after failed medical therapy. However, up to 10% of patients are troubled by adverse side effects such as bloating, inability to belch and persistent dysphagia. In an attempt to reduce these complications, a partial fundoplication has been developed.

Laparoscopic Image of Anterior 180° Fundoplication

Results:
One hundred and six procedures were performed in total. Eighty patients (75%) returned a completed questionnaire. All procedures were laparoscopic, performed by a single surgeon. The median age was 58 (55 patients were female). The mean length of follow-up was four years (range 1.7 - 7.1 years).

Gastro-oesophageal reflux symptoms were significantly improved (analogue score 0-3) in 71 patients (89%). All of these patients rated the outcome of surgery as good or excellent. Seventy-four patients (93%) believed their original decision to undergo surgery was correct. Five patients had persistent / recurrent reflux symptoms during the study period. All had normal subsequent gastroscopy and oesophageal pH tests. Six patients experienced dysphagia post-operatively. Four of these had a normal contrast swallow, while two patients required endoscopic dilatation. All have had subsequent resolution of symptoms.

Conclusions:
Our experience suggests that laparoscopic anterior fundoplication is an effective procedure for the surgical management of GORD. It is associated with a high rate of patient satisfaction and mild, temporary post-operative symptoms.