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A. Subject

Peroral Endoscopic Myotomy (POEM)

B. Background

Achalasia is a rare esophageal disorder that affects about 1 in every 100,000 people. The major symptom of achalasia is usually difficulty with swallowing. Most people are diagnosed between the ages of 25 and 60 years. Achalasia occurs when nerves in the esophagus become damaged. As a result, the esophagus becomes paralyzed and dilated over time and eventually loses the ability to squeeze food down into the stomach. The term “achalasia” actually means “failure to relax.”

Although the condition cannot be cured, the symptoms can usually be controlled with treatment. Treatments for achalasia include oral medications, dilation or stretching of the esophagus, surgery (open and laparoscopic), endoscopic surgery, and injection of muscle-relaxing medicines (botulinum toxin) directly into the esophagus.

Peroral endoscopic myotomy (POEM) is an endoscopic procedure developed in Japan. It is performed with the patient under general anesthesia. POEM differs from traditional laparoscopic surgery, which involves the complete division of both the longitudinal and circular lower esophageal muscle layers. The POEM procedure is performed in 4 steps: 1) mucosal incision/entry into the submucosa, 2) creation of a submucosal tunnel, 3) myotomy, and 4) closure of the mucosal incision. Studies suggest that POEM can achieve results comparable to or even better than those of pneumatic dilation and surgical myotomy with similar safety. However, POEM is a newer procedure, and knowledge of its long-term outcome is limited.

POEM is a form of natural orifice transluminal endoscopic surgery. The procedure is performed perorally, without any incisions in the chest or abdomen. The advantage o.6 (t)-6.6 (h)100.5 (



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IV. Previous therapies for achalasia, such as PD, botulinum toxin injection, or LHM, are not contraindications to POEM.

V. Patients receiving POEM

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