

# Role of Functional Luminal Imaging Probe Post Heller Myotomy or Peroral Endoscopic Myotomy

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Achalasia is an esophageal motility disorder characterized by impaired relaxation of the lower esophageal sphincter and absence of normal peristalsis. Pneumatic dilation, laparoscopic Heller myotomy with partial fundoplication (LHM), and peroral endoscopic myotomy (POEM) are currently available treatment options but they are not curative. As such, clinical recurrence or failure may occur post-treatment with any of the above-mentioned modalities. We review literature pertaining to the role of functional luminal imaging probe (FLIP) in this scenario.

Clinical failure or recurrence post Laparoscopic Heller Myotomy (LHM) or Peroral Endoscopic Myotomy (POEM) is directly indicative of need for sphincter-directed therapy. While high resolution manometry (HRM) is the gold standard test of choice to evaluate the scope of sphincter directed therapy in treatment naïve achalasia patients, it's not considered as reliable post-treatment with LHM or POEM. Recent studies have shown that post-treatment with LHM or POEM, FLIP is emerging as the diagnostic test of choice that can show incomplete esophageal emptying in treated achalasia, thereby warranting repeat sphincter-directed therapy.

A large retrospective study was conducted evaluating patients with failed LHM OR POEM [1]. HRM and FLIP were performed in all patients after treatment for achalasia was rendered with either modality. 76% of the patients had concordant results between HRM and FLIP. Of patients with an abnormal HRM, 49% had a discordantly normal FLIP. 5% patients with a normal HRM had a concordantly abnormal FLIP. Results also showed that FLIP results altered management decisions for sphincter-directed therapy in 52% of patients. Sphincter directed therapy was more likely to result in clinical success among those with a concordantly abnormal FLIP and HRM, compared with

those with only an abnormal HRM or FLIP. While this was a retrospective study and similar results will have to be reproduced by large prospective trials, this study definitely solidifies FLIP as a diagnostic test to evaluate clinical success post-treatment for achalasia.

## References

1. Yervant Ichkhanian, Olaya Brewer Gutierrez, Sabine Roman, In Kyung Yoo, Andrew Canakis, et al. Role of functional luminal imaging probe in the management of postmyotomy clinical failure. 2022.

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