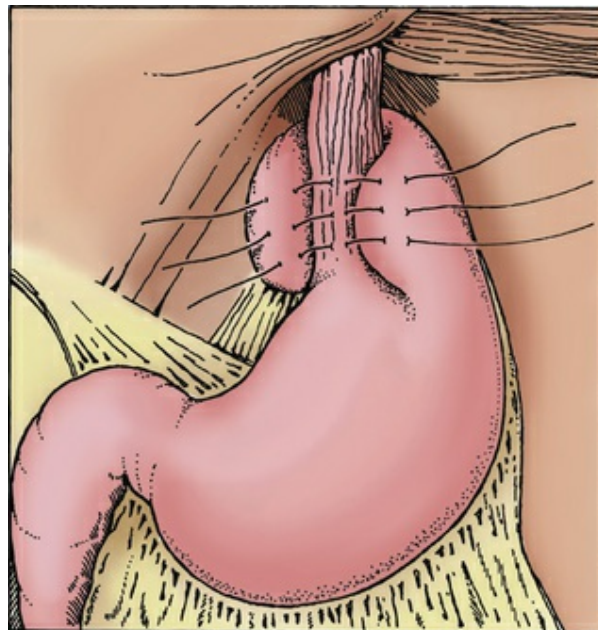


inhibitors (PPIs; esomeprazole [Nexium], lansoprazole [Prevacid], omeprazole [Prilosec], pantoprazole [Protonix], and rabeprazole [AcipHex]) reduce gastric hydrochloric acid secretion and may stimulate some increase in LES tone. Use of metoclopramide remains controversial; there is no sufficient evidence to support the effectiveness with GER, and several side effects have been noted among infants; however, the medication is still commonly prescribed.

Surgical management of GER is reserved for children with severe complications, such as recurrent aspiration pneumonia, apnea, severe esophagitis, or failure to thrive, and for children who have failed to respond to medical therapy. The **Nissen fundoplication** (Fig. 22-3) is the most common surgical procedure (Wilshire and Watson, 2013). This surgery involves passage of the gastric fundus behind the esophagus to encircle the distal esophagus. Complications following fundoplication include breakdown of the wrap, small bowel obstruction, gas-bloat syndrome, infection, retching, and dumping syndrome (Wilshire and Watson, 2013).



**FIG 22-3** Nissen fundoplication sutures passing through esophageal musculature.

## Nursing Care Management