# Report egd03

## Indications

76-year-old male here for an EGD for the evaluation of his laryngopharyngeal reflux with a recent EGD with biopsy of the gastroesophageal junction showing potential Barrett's.

## EGD Findings

A high-definition endoscope was advanced to the A high-definition endoscope was advanced to the descending duodenum.

**Esophagus:**

The esophageal mucosa was normal. The gastroesophageal junction and the diaphragmatic hiatus were both at 41 centimeters. There was no hiatal hernia. There was grade A esophagitis, but no obvious Barrett's esophagus seen. Biopsies were taken.

**Stomach:**

The gastric mucosa was mostly normal. There was some mild erythema at the gastric antrum. Random biopsies were taken to rule out H. pylori.

**Duodenum:**

The duodenum had mild duodenitis.

The 16 cm Endoflip catheter was advanced and the following measurements performed:  
50 mL: Pressure 36.9, DI 2.2, compliance 177, diameter 10.1, area 80.  
60 mL: Pressure 43.7, DI 3.4, compliance 237, diameter 13.8, area 150.  
There were normal anterograde repetitive contractions noted throughout every balloon volume. There was a borderline EGJ outflow obstruction at 50 mL, but this improved at 60 mL. Mucosal Integrity Testing (MI) completed utilizing the MiVu EndoCap device. The squamocolumnar junction was at 41 centimeters; the MiVu device was advanced to 39 centimeters, 2 centimeters above the SCJ. The measurement was recorded over a centimeter segment of the esophagus. The EndoCap device was removed. Mucosal integrity was measured by mucosal impedance; GERD probability was recorded as 50.7%, supporting the diagnosis of GERD. Manometry and 24-hour pH impedance catheters were advanced under endoscopic guidance.

## Impressions

1. Grade A esophagitis without obvious Barrett's esophagus

2. No hiatal hernia

3. Mild gastric antral erythema

4. Mild duodenitis

5. Successful Endoflip showing borderline EGJ outflow obstruction at 50 mL but improvement at 60 mL

6. Successful MiVu mucosal impedance testing supporting a diagnosis of GERD

7. Manometry and 24-hour pH impedance catheters placed