lan Beckingham DM FRCS (Gen. Surg.)
Consultant Laparoscopic and Hepatobiliary Surgeon

Secretary:

Linda Chambers Tel: 07808 552282

Email: lcmedical@me.com

www.ianbeckingham.com

UG21lite Laparoscopic Heller's Cardiomyotomy

Expires end of December 2013 Issued February 2013

You can get more information and share your experience at www.aboutmyhealth.org
Tell us how useful you found this document at www.patientfeedback.org











www.rcseng.ac.uk

www.rcsed.ac.uk

www.asgbi.org.uk

www.pre-op.org





This document will give you information about a laparoscopic Heller's cardiomyotomy. If you have any questions, you should ask your GP, or other relevant health professional.

What is achalasia?

Achalasia is a condition that causes problems with swallowing. It can also cause regurgitation (bringing food back into your mouth), chest pain and weight loss. Achalasia happens when the cardiac sphincter does not relax properly, and peristalsis does not work well enough.

What are the benefits of surgery?

The aim of surgery is to make it easier for you to swallow. The benefits will often last for a lifetime.

Are there any alternatives to surgery?

The alternatives to surgery such as eating more liquid food, drug treatment and stretching the valve will usually give only temporary relief of your symptoms.

What does the operation involve?

The operation is performed under a general anaesthetic and usually takes between an hour and an hour and a half.

Your surgeon will make several small cuts on your abdomen. They will place surgical instruments, along with a telescope, inside your abdomen and perform the operation.

Your surgeon will cut and spread apart the layers of muscle of the cardiac sphincter and lower end of the oesophagus (see figure 1). The muscle will heal on its own.

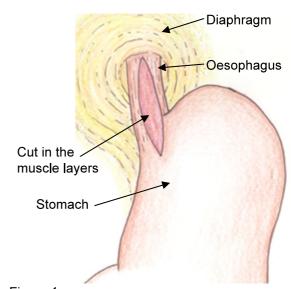


Figure 1
Heller's cardiomyotomy

What complications can happen?

1 General complications

- Pain
- Bleeding
- Infection of the surgical site (wound)
- Unsightly scarring
- Developing a hernia in the scar
- · Blood clots

2 Specific complications

- Damage to internal structures
- Developing a hernia near one of the cuts
- Surgical emphysema
- Making a hole in the oesophagus or stomach
- Difficulty swallowing
- Acid reflux
- Air in the chest cavity

How soon will I recover?

You should be able to go home within a few days.

You should be able to return to work after two weeks depending on the extent of surgery and your type of work.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, you should ask a member of the healthcare team or your GP for advice.



Most people make a good recovery. 9 in 10 people have much improved swallowing and can eat a normal diet.

Summary

Achalasia is not life-threatening but the symptoms can be disabling. A laparoscopic Heller's cardiomyotomy is a dependable way to help you swallow more easily for a long time.

Acknowledgements

Author: Mr Ian Beckingham DM FRCS Illustrations: Hannah Ravenscroft RM

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you.

