Clinical trial: persistent gastro-oesophageal reflux symptoms despite standard therapy with proton pump inhibitors - a follow-up study of intraluminal-impedance guided therapy.

BACKGROUND: Persistent gastro-oesophageal reflux disease (GERD), despite proton pump inhibitor (PPI) therapy, is a common problem. Combined pH/impedance monitoring (pH/MII) enables detection of reflux episodes. Aim To identify patients with objective episodes of persistent reflux and second, to evaluate the effect of modified therapy based on the results of pH/MII. METHODS: In all, 143 patients were examined with pH/MII because of GERD-symptoms resistant to PPI-therapy. Patients with pathological pH/MII (group 1) and with normal results (group 2) were identified. Therapy modifications were evaluated after a minimum follow-up of 3 months. RESULTS: In 56 of 143 (39.1%) patients, pathological findings in pH/MII were identified. Therapy was escalated in 33/52 patients (group 1) and in 30/71 patients (group 2). Escalating therapy led to symptomatic relief in 90.9% of the patients in group 1 and 43.3% of the patients in group 2 (P< 0.001). CONCLUSIONS: GERD symptoms refractory to PPI-therapy could be objectively identified with pH/MII in almost 40% of all patients. Furthermore, escalating anti-reflux therapy if pH/MII was pathological is associated with a significantly higher rate of successful treatment compared to the patients with normal findings. Therefore, pH/MII facilitates a more focussed therapeutical approach to patients with PPI-resistant GERD.