Joint Event
32nd International Congress on
Vision Science and Eye
5th International Conference on
Advances in Neonatal and Pediatric Nutrition
37th World Cardiology Conference
September 26, 2022
WEBINAR

Gen Med (Los Angeles) 2022, Volume 10

Esophageal achalasia in an adolescent: A case report

Corinna Mae R
St. Luke's Medical Center, Philippines

Achalasia is a rare disorder, particularly in Pediatrics, characterized by esophageal aperistalsis and inadequate relaxation of the lower esophageal sphincter. Its etiology remains unclear and is mostly idiopathic. This is a case of an adolescent male who presented with progressive dysphagia, occasional chest pain, and significant weight loss, and was diagnosed with Esophageal Achalasia through upper GI series, endoscopy and manometry. The patient underwent Heller's Myotomy, the surgical gold standard for treatment.

Keywords: Achalasia, Heller's Myotomy, Esophageal Motility Disorder

Achalasia of the esophagus is a very rare condition, with an estimated annual incidence of 1:100,000 cases overall, and less than 5% of which occur in children (0.11 per 100,000 pediatric patients). Pediatric achalasia is generally diagnosed between 7 and 15 years of age and has a slight predominance in boys. In the Philippines, only 3 cases have been reported in the Philippine Pediatric Society Registry for the year 2020. Achalasia is a pathological condition causing dysphagia, reflux, and regurgitation. The hallmarks of diagnosis include esophageal dysmotility and lack of relaxation of the Lower Esophageal Sphincter (LES). Diagnosis is suspected by the clinical history, but is often delayed in children because of the rarity of the disease. If left untreated, the sequelae can be significant, as the proximal esophageal tissue becomes more compliant as a compensatory measure and entirely non- functional by end-stage disease. It is a life-long, debilitating condition, with a significant impact on quality of life. Hence, prompt diagnosis and intervention are needed. To date, Pneumatic Balloon Dilation (PD) and Heller's Myotomy (HM) are considered the most effective therapeutic options in children.