# *STRETTA:* A non-invasive treatment for GERD that may allow you to stop taking your daily PPI medication!

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**I have written in the past in *Community Health*** about gastroesophageal reflux disease (GERD). Gastroesophageal reflux is a condition in which acid from the stomach flows backward up into the esophagus. This can cause a burning chest/upper abdominal discomfort, sour taste, rifting and sometimes regurgitation of partially digested food into the mouth, among other symptoms. Gastroesophageal reflux occurs in almost all of us from time to time, but 20% to 30% of Americans experience symptoms at least weekly. Previously I've discussed the symptoms, complications and medical treatments of GERD. Here, I want to introduce a new treatment that bridges the gap between medications and surgery for GERD.

Many people with GERD will respond very well to medications (an estimated 70%), but there are certainly some who seem to be resistant or refractory to the usual medical therapy. Of the many people with GERD, it is estimated that 5% will have surgery. The surgeries include laparoscopic fundoplication (surgically wrapping the stomach around the esophagus) and using surgically implanted devices.

Surgery is a big step, and in my practice, I generally reserve it for those with very severe GERD, those with large or complicated hiatal hernias or those who are truly intolerant to medications.

Stretta, a new and unique therapy, may be a bridge between medications and surgery for GERD patients. Stretta uses radiofrequency energy delivered through the endoscope. It is a non-surgical, safe and effective option for patients with chronic GERD.

Because Stretta doesn't require surgery, nor does it introduce foreign implants, it can be use in a variety of patients.

Stretta does not significantly alter the anatomy. It works by strengthening the lower esophageal sphincter—the muscle between the esophagus and stomach. The treatment results in improved muscle tissue, increased muscle wall thickness, less transient LES relaxations, reduced acid exposure in the esophagus, and improved reflux symptoms.

Stretta studies have shown a high rate of effectiveness and durability with very low complication rates and much lower costs compared with surgery.

There is more than 10 years of data, with more than 20,000 procedures done with Stretta. Clinical studies have shown that 86% of Stretta patients have remained off daily GERD medications at four years. Additionally, 64% of patients have remained off daily GERD medications at 10 years. The complication rate for the procedure is less than 1%.

The procedure takes about one hour. There is no hospital stay, and patients are typically able to return to normal activities within a few days.

Target populations for Stretta appear to be the 30% of persons who don't get complete relief with daily proton pump inhibitor medications or those persons who may not want surgery. Stretta may also be a good option for patients with atypical GERD symptoms, such as sore throat, hoarseness and chronic coughing (laryngopharyngeal reflux); patients with GERD after bariatric surgery (especially the gastric sleeve); and those who have GERD many years after having anti-reflux surgery.

Increasingly, as more patients are concerned about the possible side effects of long term use of medications, the Stretta procedure may also be used in "typical GERD" patients.

We continue to live in exciting and innovative times with respect to the advances in modern medicine. In my opinion, the Stretta procedure, which is now an option for our patients, is yet another example of this, and it appears to be a novel and effective treatment for GERD.