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Achalasia: A Case Report

Imelda Rey, Rustam Effendi YS, Gontar Alamsyah Siregar, Lukman Hakim Zain
Division of Gastroenterohepatologi, Department of Internal Medicine, University of North Sumatera/Adam Malik Hospital, Medan, Indonesia

INTRODUCTION

Achalasia is a neurodegenerative motility disorder of the oesophagus resulting in deranged oesophageal peristalsis and loss of lower oesophageal sphincter function. We reported a case of Achalasia that have improvement in symptom after underwent balloon dilation.

CASE ILLUSTRATION

A 57-year-old woman presented to our hospital complaining of dysphagia for 30 years, with progressive dysphagia and weight loss of 5 kg in the last 4 months. She suffered dysphagia to solids and liquids, with regurgitation and heartburn. On physical examination, no abnormal findings were noted. Laboratory test results showed normal results. Esophagram show dilated of the esophagus, a narrow esophagogastriac junction and poor emptying of barium. Upper endoscopy revealed dilated distal oesophagus with retained undigested food particles. She had undergone balloon dilation for 2 times before significant improvement in symptoms noticed clinically.

DISCUSSION

Achalasia can be treated by drugs (nitrate, calcium channel blocker), endoscopically (botulinum toxin injection, balloon dilation, peroral endoscopic myotomy- POEM) and surgically (Heller’s myotomy). Balloon dilation of the LES has been shown to be an effective modality for treating
the achalasia. The proposed advantage of pneumatic dilation is that it achieves symptomatic relief while being able to avoid the risks associated with more invasive surgery.

**Keywords:** achalasia, balloon dilation