

Upper GI – Anti-reflux Surgery

Introduction

Antireflux surgery (also known as fundoplication) is the standard surgical method of treating gastro-oesophageal reflux disease.

Reflux disease is the result of acid refluxing from the stomach back up into the oesophagus. This causes inflammation and pain (heartburn). Normally, there is a barrier to acid reflux. Part of this barrier is the lowermost muscle of the oesophagus (called the lower oesophageal sphincter). Most of the time, this muscle is contracted, which closes off the oesophagus from the stomach. In patients with reflux disease, the sphincter does not function normally. The muscle is either weak or relaxes inappropriately.

Fundoplication is a surgical technique that strengthens the barrier to acid reflux when the sphincter does not function normally.

The Covid pandemic has had a significant impact on the NHS ability to provide routine elective services. We recognise that patients are waiting longer than we would all like and it is not always possible to identify when treatment will take place. This document provides you with information on how you can support yourself while waiting to attend the hospital.

Guidance for Patients

If the operation is being carried out for the first time, it is nearly always achieved using keyhole techniques (laparoscopic surgery). Compared to open surgery, which involves a larger incision, the laparoscopic method leads to a speedier recovery and less post-operative pain. Most patients have a hiatus hernia associated with their reflux disease and repair of this hernia is undertaken at the same time as anti-reflux surgery. The hernia sac is pulled down from the chest and stitched so that it remains within the abdomen. Additionally the opening in the diaphragm, through which the oesophagus passes from the chest into the abdomen, is tightened. During the procedure the part of the stomach that is closest to the entry of the oesophagus (the fundus of the stomach) is gathered, wrapped and stitched around the lower end of the oesophagus. This procedure increases the pressure at the lower end of the oesophagus and thereby reduces acid reflux. This wrap (or fundoplication) produces a kind of one-way valve from the oesophagus to the stomach. It is because the operation prevents reflux from the stomach into the oesophagus that we call the procedure 'antireflux surgery'. The operation usually takes between 1 and 1½ hours.

What should I do if my health is deteriorating?

Urgent Health Advice

For urgent health advice about physical or mental health, when it's not an emergency, please call 111 from any landline or mobile phone. You can also visit www.nhs.uk. The NHS 111 service is available 24 hours a day, seven days a week.

Life Threatening Emergencies

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The contents of this information have been reviewed and approved by the Royal Wolverhampton NHS Trust

My Planned Care Patient Information Platform

For something life threatening –severe bleeding, breathing difficulties or chest pains –please dial 999.

GP surgeries are still open

GP practice staff are also helping patients to manage their conditions at home while they wait for hospital appointments. GP surgeries are still open and are working differently to how they did before the COVID-19 pandemic and GP practices continue to make best use of telephone, online and video consultations. Face-to-face appointments are still being given to those who need it. When you phone or use an online form to contact your GP surgery to make an appointment, you will be asked some questions which are designed to help staff guide you to the most appropriate clinical person to help you with your condition. This could be a nurse, clinical pharmacist, physician's associate, GP or paramedic.

Contact Us

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