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## Reflux

Gastro-Oesophageal Reflux Disease, also known as GORD or simply 'Reflux' is a common condition in Australia. It is a condition where stomach acid and other gastric juices, sometimes along with undigested food, flow backwards and the wrong way from the stomach up the oesophagus (food-pipe or gullet).

It is caused by a failure of one or more of several normal mechanisms that prevent reflux at the lower end of the oesophagus where it joins the stomach.

Patients suffering from reflux often report symptoms such as heartburn, waterbrash (a feeling of excess saliva in the mouth), indigestion or even regurgitation of gastric juices or partially digested food. This often occurs in bed at night or after a large meal.

Sometimes GORD can cause other problems including respiratory issues such as a chronic cough and irritation of the oesophagus leading to Barrett's Oesophagus.

Most cases of GORD can be managed with medications alone, however in some situations surgery is required and, in these situations, it is generally very effective.

The operation performed is a Laparoscopic (key-hole) Fundoplication. Hiatus Hernia can also lead to reflux and can also be managed with a surgical procedure to fix the hernia and the reflux simultaneously.

## Hiatus Hernia and other Diaphragmatic Hernia

This is a condition in which the opening in the diaphragm that the oesophagus passes through (the oesophageal hiatus) stretches. This allows the stomach or other organs to slip up and into the chest cavity. These hernias can be categorised into four types:

- Type 1: Sliding type. The hiatus stretches, and the upper part of the stomach slides up along with the junction between the oesophagus and the stomach.
- Type 2: Rolling type. Also known as "paraoesophageal hernia". The junction between the oesophagus and the stomach remains where it belongs below the diaphragm, but the very top of the stomach, the fundus, rolls up through the stretched hiatus.
- Type 3: Mixed type. A combination of types 1 and 2.
- Type 4: Organs other than the upper stomach have slipped through the stretched hiatus. Examples include, the entire stomach, part of the liver or part of the colon.

95% are Type 1 and can often be managed with medications alone. Large hiatus hernias can cause reflux, cardiac (heart) symptoms and respiratory (lung) symptoms. These larger hernias often require repair and this is done with key-hole (laparoscopic) surgery, usually combined with a Fundoplication (see Gastro-Oesophageal Reflux section).