



Esophageal manometric analysis of 23 patients with globus syndrome

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Abstract

AIM: Globus syndrome can be caused by many factors. Our aim is to study the features of esophageal manometry on patient with globus syndrome and to find the relations between globus syndrome and esophageal disorders, especially with dysfunction of esophageal motility.

METHODS: Studies were performed on 23 patients with globus syndrome consisting of 5 men and 18 women aged of 21-65 years and on 14 healthy normal subjects including 6 men and 8 women aged of 27-64 years. All the patients had stopped taking medicine three days and had fasted for four hours before examined. A 4 channel recorder from PC polygraph HR was adopted. LESP, peristaltic waves in esophageal body, UESP, length of UES, the residual pressure of UES relaxation, the duration of UES relaxation were recorded.

RESULTS: The mean UESP in 23 patients and 14 healthy subjects were respectively 55.3 ± 39.8 mmHg ($\bar{x} \pm SD$) and 53.1 ± 27.8 mmHg ($\bar{x} \pm SD$) ($P > 0.05$). The length of UES respectively 3.4 ± 1.0 cm ($\bar{x} \pm SD$) and 2.9 ± 1.1 cm ($\bar{x} \pm SD$) ($P > 0.05$). The duration of UES relaxation were 918.6 ± 416.3 msec ($\bar{x} \pm SD$) and 745.0 ± 245.9 msec ($P > 0.05$). However, there are some special manifestations in patients with globes syndrome: 3 cases of hypertonicity of UES (UESP > 120 mmHg), 6 cases of hypotonicity of UES (UESP < 30 mmHg) and 5 cases of incomplete relaxation (the residual pressure of UES relaxation higher than 5 mmHg). The mean LESP of 23 patients and 14 healthy subjects were respectively 18.4 ± 0.3 mmHg ([AKx-D] $\pm SD$) and 17.6 ± 7.6 mmHg ($\bar{x} \pm SD$) ($P > 0.05$). There were 15 of 23 patients (65.5%) being abnormal in the peristaltic waves in esophageal body and 3 of 14 healthy subjects (21.4%) being abnormal.

CONCLUSIONS: (1) Globus syndrome may manifest special manometric features as hypertonicity of UES, hypotonicity of UES and achalasia of UES. (2) Dysfunction of esophageal motility may be one of the causes of globus syndrome.

Key words: Globus syndrome; Esophageal manometry

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