

Meeting abstract

Open Access

Laparoscopic antireflux surgery in the elderly

Rita Compagna, Corrado Rispoli, Nicola Rocco, Antonio Braun, Umberto Avallone and Bruno Amato*

Address: Department of General Surgery, University of Naples Federico II, Italy

* Corresponding author

from XXI Annual Meeting of The Italian Society of Geriatric Surgery
Terni, Italy. 4–6 December 2008

Published: 1 April 2009

BMC Geriatrics 2009, **9**(Suppl 1):A29 doi:10.1186/1471-2318-9-S1-A29

This abstract is available from: <http://www.biomedcentral.com/1471-2318/9/S1/A29>

© 2009 Compagna et al; licensee BioMed Central Ltd.

Introduction

Laparoscopic antireflux surgery (LARS) has shown excellent results for treatment of gastroesophageal reflux disease (GERD). With success rates between 93% and 97% and a low incidence of complications. Life expectancy in our country is increasing and more patients over 65 years of age are admitted for surgical intervention. The aim of this retrospective study was to compare reflux and five years surgical outcome of laparoscopic antireflux surgery (LARS) in patients younger than 65 years and elderly patients aged 65 years or older.

Materials and methods

From January 2002 to February 2006 84 patients underwent LARS: 24 elderly patients (group 1) that were compared with 60 younger patients (group 2). Three operations were performed: complete 360 degree fundoplication in 42 patients (50.1%), partial posterior fundoplication in 21 patients (22.1%) and partial anterior fundoplication in 11 patients (5.2%).

Results

The conversion rate was higher in group 1 (11.2% vs 7.2%) as was the morbidity rate (6.3% vs 3.1%) in group 2. Mean hospital stay was longer for group 1 (7.5 vs 4.3).

Conclusion

Elderly patients were satisfied with their functional results as were younger patients. In conclusion, LARS in the elderly is a safe and efficient procedure.