

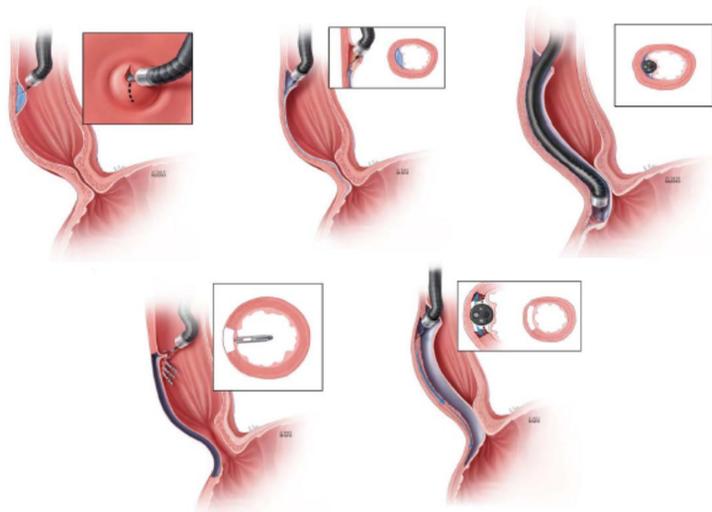
POEM Perceptions: A Survey of Gastroenterologists and the Treatment of Achalasia in the Philadelphia Region

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Introduction

Peroral endoscopic myotomy (POEM) is a relatively new innovative technique that has been shown to be an effective treatment for achalasia. Despite studies demonstrating its effectiveness as a less invasive therapy, POEM is still not as widely implemented as the traditional Heller myotomy for the treatment of achalasia. We aimed to explore the barriers that may impact implementation of POEM and to assess the regional perception of POEM amongst gastroenterologists in an urban setting.



Reinersman JM, Wigle DA, Blackmon SH, Wong Kee, Song LM. Peroral Endoscopic Myotomy (POEM). Available from <http://www.ctsnet.org/article/peroral-endoscopic-myotomy-poem>.

Methods

An Internal Review Board (IRB) approved our 21-question multiple-choice survey that was developed by a panel of specialists that included a POEM trained advanced endoscopist. This was sent via email to 208 physicians practicing in the Philadelphia area. Some questions allowed for responders to select all answers that applied.

Results

Forty-five physicians (45/208, 21.6%) completed our online survey. Of the total 45 responders, 82.2% were male and 68.9% were practicing at an academic medical center. Approximately 73% of responders had treated anywhere from 5 to 50 patients diagnosed with achalasia during their career. Only 11% have treated over 50 patients with achalasia.

In assessing what therapies these gastroenterologists have prescribed in the treatment of achalasia, the majority of responders prescribed botulinum toxin injections (86.4%) and endoscopic dilation (standard and pneumatic) (70%).

In addition, 72.7% recommended surgical myotomy (laparoscopic or open) while only 27.3% prescribed POEM. In fact, 69.8% of responders had never prescribed POEM even though 95.6% would consider POEM for the treatment of achalasia and 78.6% of responders believed POEM will gain acceptance as a main form of therapy. Nearly a quarter (24.4%) of responders were unaware of a program that performed POEM in the area.

Table 1. Survey Demographics

Variable	No. (%)
Male sex	37 (82.2)
Currently perform ERCP/EUS	16 (35.6)
Location of practice	
Academic Medical Center	31 (68.9)
Community Hospital/Practice	14 (31.1)
Number of achalasia patients treated during GI career	
Less than 5	7 (15.6)
5-10 patients	11 (24.4)
11-20 patients	12 (26.7)
21-50 patients	10 (22.2)
>50 patients	5 (11.1)
Have access to manometry	41 (95.3)

Table 2. What therapies have you prescribed for the patients diagnosed with achalasia within your practice? (select all that apply)

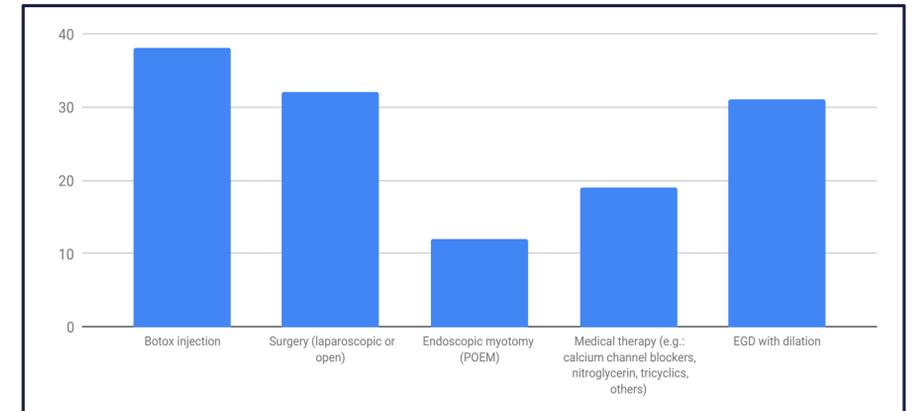
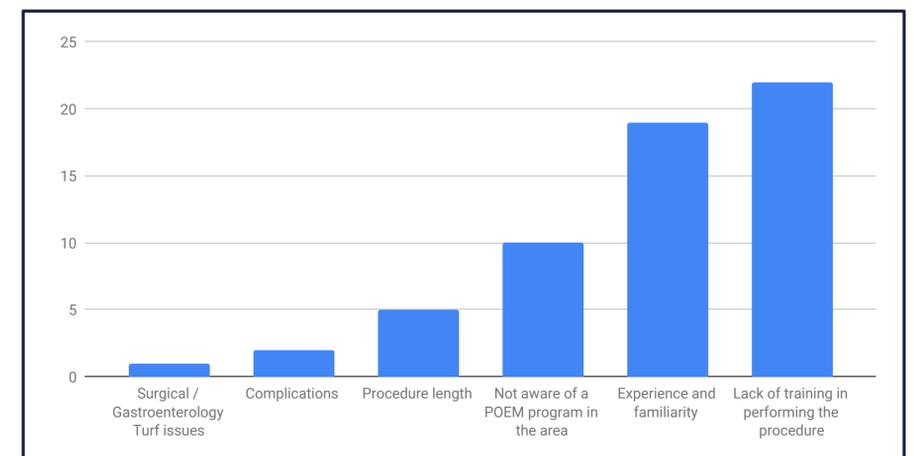


Table 3. What obstacles are preventing you from treating your patients with appropriate indications with POEM? (select all that apply)



Conclusion

Although the vast majority of gastroenterologists surveyed considered POEM an acceptable therapy for the treatment of achalasia (95.6%), a significantly smaller portion of physicians had actually recommended it themselves (27.3%). A fairly significant percentage of responders were unaware of a local POEM program, which may have served as a barrier to their implementation of this therapy. Future studies will be to compare our current data to that in 18 months after establishment of a POEM program at a local academic hospital.