ESOPHAGEAL MOTOR FUNCTION EVALUATED BY SCINTIGRAPHY AND MANOMETRY IN DIABETIC PATIENTS

Thesis

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List of Abbreviations

UES: Upper esophageal sphincter

LES: Lower esophageal sphincter

LESP: Lower esophageal sphincter pressure

TLESR: Transient lower esophageal sphincter relaxation

DM : Diabetes Mellitus

GIT: Gastrointestinal Tract

VIP: Vasoactive intenstinal peptide

GRP Calcitonin gene-related peptide

NIDDM: Non-insulin dependent diabetes mellitus

HDL: High density lipoproteins

ECG : Electrocardiogram

FBS : Fasting blood sugar

PPBS: Post prandial blood sugar

Ca : Calcium



INTRODUCTION

INTRODUCTION

The field of esophageal motility has gained increasing interest in the last years. The availability of new investigator techniques for motility studies leads to growing awareness and better understanding of this new subject. (Closure Ray E. et al., 1986).

Esophageal motility disorders are quite common in clinical paractice, whether functional or organic. Organic causes include diabetes mellitus, peptic ulcer disease, postgastric surgical states, chronic gastritis, reflux esophagitis, scleroderma, systemic neuromuscular disorders, .. etc. (Sudkwist G. et al., 1989).

Extensive work has been held to investigate motility disorders like esophageal scintigraphy and manometry in diabetic patients, previous studies showed that there is relationship between diabetes mellitus and esophageal motility abnormality and neuropathy (Brogstom P.S. et al., 1988).

The mechanism behind esophageal smooth muscle dysfunction is related to autonomic neuropathy, phymacologic and histologic studies have displayed vagal Neuropathy as being responsible.

Radiological examination have the advantage of showing not only the motor function of the esophagus but also possible morphological lesions which might be responsible for dysphagea as exhibited in some patients with normal motor function. Another advantage of scintigraphy is possibility for evaluating esophageal reflux seen in some patients. Manometric esophageal motor abnormalities can be seen in patients with normal scintigraphy (Vernon A. Vix, 1969).

AIM OF THE WORK

The aim of this present work is to clarify the interrelation ship between esophageal motility abnormalities in diabetic patients by scintigraphy and manometry.