



Patient Counseling Report

➤ **BARRETT'S ESOPHAGUS**

WHAT IS BARRETT'S ESOPHAGUS?

Barrett's Esophagus is a condition of the esophagus in which the normal lining of the esophagus has been replaced by cells from the intestine in a process called specialized intestinal metaplasia. It occurs in about 10% of people who have chronic or longstanding gastroesophageal reflux disease (GERD). This change of one cell type into another is the result of your body's protection mechanism against GERD. Although the risk is low in most patients, Barrett's Esophagus can progress to a type of cancer known as esophageal cancer (adenocarcinoma). At the present time, no one can predict which patients with Barrett's Esophagus will develop cancer. It is, therefore, recommended that all patients who have Barrett's Esophagus have their esophagus periodically checked to detect cancer when it is early and more likely to be successfully treated.

HOW IS BARRETT'S ESOPHAGUS DIAGNOSED?

During Endoscopy Screening, a thin, flexible tube with a light is inserted through the mouth into the esophagus. This device gives your doctor the ability to see the lining of your esophagus. If an area appears abnormal, a biopsy is taken. This biopsy is reviewed under a microscope by a pathologist who specializes in gastrointestinal pathology. A diagnosis is made and if Barrett's Esophagus is found an appropriate treatment will be recommended by your physician.

WHAT ARE THE SYMPTOMS OF BARRETT'S?

The most common symptom associated with Barrett's Esophagus is heartburn (GERD).

Other symptoms associated with Barrett's are bleeding from esophageal ulcers and or dysphagia (the inability to swallow properly) due to a stricture in the esophagus.

WHO IS AT RISK FOR DEVELOPING BARRETT'S ESOPHAGUS?

Although anyone of any age, gender or race with a chronic problem with heartburn could develop Barrett's Esophagus it is more common in caucasian men over the age of 50 years old.

ARE THERE COMPLICATIONS THAT CAN RESULT FROM BARRETT'S ESOPHAGUS?

Barrett's Esophagus, if untreated, can develop into cancer. Fortunately, the results of multiple studies of patients followed for many years indicate that about 90-95% of patients who have Barrett's Esophagus DO NOT develop cancer.

WHAT TREATMENT OPTIONS DO I HAVE?

The treatment of Barrett's Esophagus depends greatly on whether your Barrett's Esophagus has premalignant cells microscopically (Dysplasia). Your physician will recommend the appropriate treatment. Some options are: esophagectomy (surgical removal of the esophagus), experimental therapies, such as thermal ablation therapy, Endoscopic Mucosal Resection (EMR) and endoscopic biopsy surveillance.

WHAT ELSE SHOULD I ASK MY DOCTOR?

Does my Barrett's Esophagus have Dysplasia?
How will I know if I am doing well?
Am I at risk to develop cancer?
What complications do I need to know about?
What can I do to reduce esophageal irritation?

WHERE CAN I FIND MORE INFORMATION?

American Gastroenterological Association: www.gastro.org
American College of Gastroenterology: www.acg.gi.org
American Society for Gastrointestinal Endoscopy: www.asge.org
Barrett's Info: www.barrettsinfo.com