Clinical Spotlight:
WATS\textsuperscript{3D} Detects Dysplasia that was Missed in a Patient with Chronic GERD

CASE SUMMARY:

**Patient History:**
59-year-old obese male with a 30+ year GERD history. PPI program and lifestyle changes provided some relief but patient still experienced GERD symptoms, some coughing and choking. Patient is concerned about potential long-term side effects of medication.

**Endoscopy:**
Patient underwent a surgical procedure for paraesophageal hernia repair and laparoscopic fundoplication (360 degree). Due to obesity as a risk factor and visualization of irregular Z-Line and salmon color mucosa, intraoperative EGD was performed at the GE junction with cold forceps biopsies and WATS\textsuperscript{3D}.

**Biopsy Results:**
- **Forceps Biopsy:** Specialized intestinal-type metaplasia consistent with Barrett's esophagus. Negative for dysplasia.
- **WATS\textsuperscript{3D}:** Columnar epithelium with goblet cell metaplasia consistent with Barrett’s esophagus, with findings suggestive of crypt (low grade) dysplasia.

**Impact on Patient Care:**
Patient’s reflux is being managed by securing anatomical reinforcement (fundoplication) for the lower esophageal sphincter (LES). WATS\textsuperscript{3D} finding of crypt dysplasia prompted the scheduling of ablation therapy treatment, with follow-up WATS\textsuperscript{3D} testing. Patient was also placed in a surveillance program for follow-up observation and treatment as necessary.

"Regarding the detection of atypical cells... the comprehensive sampling of the WATS\textsuperscript{3D} procedure is not simply an evolution in technique; it’s a welcomed disruptive technology that will quickly become the standard of care in foregut medicine."

Philip Woodworth, MD
General Surgery Specialist,
Mercy Clinic General Surgery
Rogers, AR