

Clinical Spotlight:

WATS^{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^{3D}.

Biopsy Results:

Forceps Biopsy: Specialized intestinal-type metaplasia consistent with Barrett's esophagus. Negative for dysplasia.

WATS^{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^{3D} finding of crypt dysplasia prompted the scheduling of ablation therapy treatment, with follow-up WATS^{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^{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.**”



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