

Laparoscopic Thal Fundoplication vs Laparoscopic Nissen Fundoplication in treatment of pediatric gastroesophageal reflux disease: a meta-analysis

Center Division Surgery Division

Authors: Kristian Alexis R. De Lara, MD and Dexter S. Aison, MD Philippine Children's Medical Center

INTRODUCTION

Gastroesophageal reflux (GER), a common condition among children, has an incidence of 0.84 per 1000 person- years and prevalence of 10-20%.

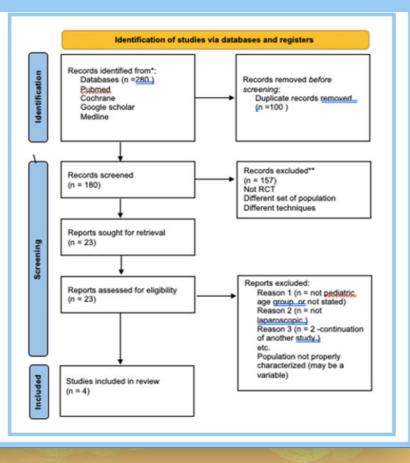
Laparoscopic fundoplication is now the standard of treatment for medically refractory pediatric GER.

There are multiple studies in comparing both Laparoscopic Thal and Laparoscopic Nissen however consensus on the preference of one technique over the other varies.

This study aims to determine the risk of recurrence needing revision surgery of pediatric gastroesophageal reflux who underwent either laparoscopic thal fundoplication vs laparoscopic nissen fundoplication.

METHODOLOGY

This is a meta- analysis study- articles published were retrieved through various search engines – Pubmed, Cochrane library, Google scholar up to April 2023. Outcome measures were GER recurrence, symptom recurrence with medications and post- operative dysphagia. Meta-analysis conducted using Revman 5.4.



RESULTS

A total 4 research articles were included in the study.

No statistical difference in disease recurrence between Laparoscopic Nissen vs Laparoscopic Thal (RR 1.84; 95% CI 0.89-1.78 p=0.17].

No statistical difference between the two procedures in terms of symptom recurrence resolved with medications (RR 1.35; 95% CI 0.78- 2.34).

Short- term post-operative dysphagia was higher risk of occurring among children who underwent laparoscopic Nissen with risk ratio of 0.55 [Cl 0.31- 0.95].

Long- term post-operative dysphagia risk of occurring was 0.51 (Cl 0.13-2.01) in favor of Laparoscopic Thal but not statistically significant with p value of 0.34.

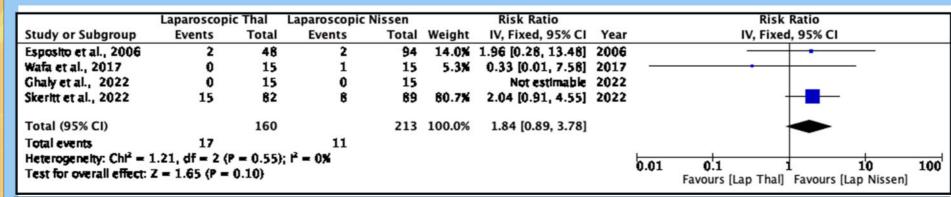


Figure 1. Forest Plot of Disease recurrence: Laparoscopic Thal vs Laparoscopic Nissen

		Laparoscopi	c Thal	Laparoscopic l	Nissen		Risk Ratio		Risk Ratio
	Study or Subgroup	Events	Total	Events	Total	Weight	M-H, Fixed, 95% CI	Year	r M-H, Fixed, 95% CI
	Esposito et al., 2006	6	48	4	94	14.6%	2.94 [0.87, 9.91]	2006	i —
	Wafa et al., 2017	2	15	6	15	32.3%	0.33 [0.08, 1.39]	2017	·
	Ghaly et al., 2022	3	15	3	15	16.1%	1.00 [0.24, 4.18]	2022	· -
	Skerttt et al., 2022	12	86	7	89	37.0%	1.77 [0.73, 4.29]	2022	 -
	Total (95% CI)		164		213	100.0%	1.35 [0.78, 2.34]		-
	Total events	23		20					
	Heterogeneity: $Chl^2 = 5.77$, $df = 3$ (P = 0.12); $l^2 = 48\%$								
								Favours [Lap Thal] Favours [Lap Nissen]	

Figure 2. Forest plot of Symptom recurrence resolved with medications

CONCLUSION

Laparoscopic Thal procedure is a **simple and efficient** procedure on the treatment of pediatric gastroesophageal reflux disease producing **similar good outcomes** in comparison to laparoscopic Nissen's procedure.

KEYWORDS

Pediatric Gastroesophageal Reflux, laparoscopy, Laparoscopic Nissen Fundoplication, Laparoscopic Thal Fundoplication, recurrence, post-operative dysphagia

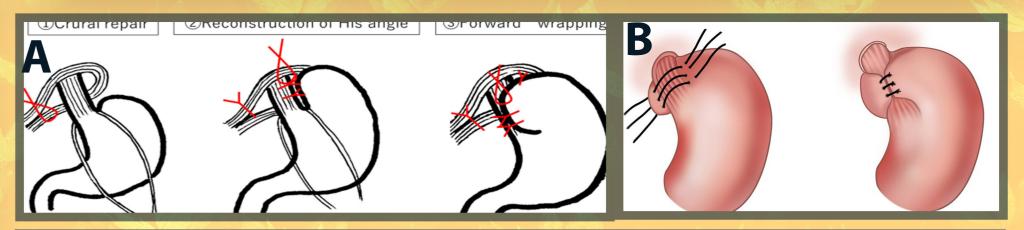


Figure A. Thal procedure and Figure B. Nissen Fundoplication

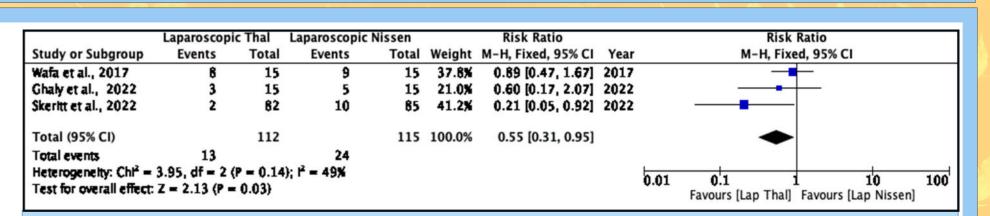


Figure 3. Forest plot of short term post-operative dysphagia

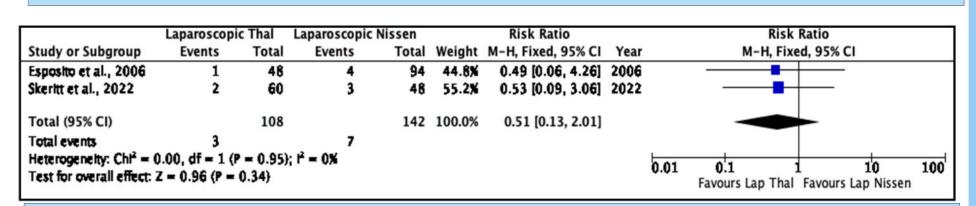


Figure 4. Forest plot of short term post-operative dysphagia