Achalasia is an idiopathic motility disorder characterized by impaired relaxation of lower esophageal sphincter (LES) and loss of peristalsis in the body of the esophagus.\(^1\) It results in severe dysphagia for solids and liquids. There is discoordination between the 2 muscle layers and different motor patterns in 3 types of achalasia.\(^2,3\) The therapy for achalasia focuses on the forced relaxation of the LES by endoscopic method or surgery. Peroral endoscopic myotomy (POEM) has been introduced as a new endoscopic procedure for the treatment of achalasia and a human study about POEM was firstly published in 2010.\(^4\) The advantages of POEM include absence of skin incisions, decreased pain, possible long myotomy, and shortened recovery time.

In Korea, about 200 patients with achalasia or spastic motility disorders have received POEM in several institutes. The first clinical study of POEM was reported in 13 patients with achalasia.\(^5\) After treatment of achalasia, most patients showed symptomatic relief and decreased EGJ integrated relaxation pressures on high-resolution manometry.\(^5\) The longitudinal muscle contraction by deglutition induces elevation of the common cavity pressure and results in pan-esophageal pressurization.\(^3\) Some achalasia patients who received POEM showed partial recovery of peristalsis or disappearance of pan-esophageal pressurization on high-resolution manometry.\(^6,7\) A registry study is needed to prove the long-term efficacy of POEM in Korea.

References

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