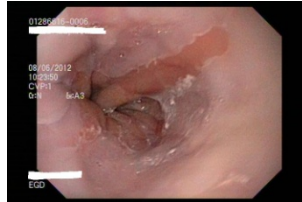


Question 6 – September 18

A 48 year old man presents with 10 years of chronic burning epigastric pain. The pain is 3/10 and worsened after meals. He denies dysphagia or odynophagia. He has taken omeprazole 20 mg once daily for 2 months without significant relief of his symptoms. He undergoes endoscopy which shows the following lesion.



There were no visible ulcerations or nodules. Biopsies showed intestinal metaplasia in the background of stratified squamous epithelia with high grade dysplasia. A repeat EGD within one month confirmed the results previously described. What is the most appropriate next step in management?

- A. Repeat EGD in 6 months
- B. Cryotherapy
- C. Referral to surgery for esophagectomy
- D. Radiofrequency ablation
- E. Chronic PPI therapy

Answer: D

Radiofrequency ablation is currently the best available ablation technique for treatment of flat high grade dysplasia. This is part of the most recently released guidelines for management of Barrett's esophagus.

Reference:

1. Bennett C, Vakil N, Bergman J, et al: Consensus Statements for Management of Barrett's Dysplasia and Early-Stage Esophageal Adenocarcinoma, Based on a Delphi Process. *Gastroenterology* 2012; 143:336-346.