

RGE - Tratamiento Quirúrgico

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Cirugía y Urología Pediátrica
2016

RGE - Tratamiento Quirúrgico

Indicaciones:

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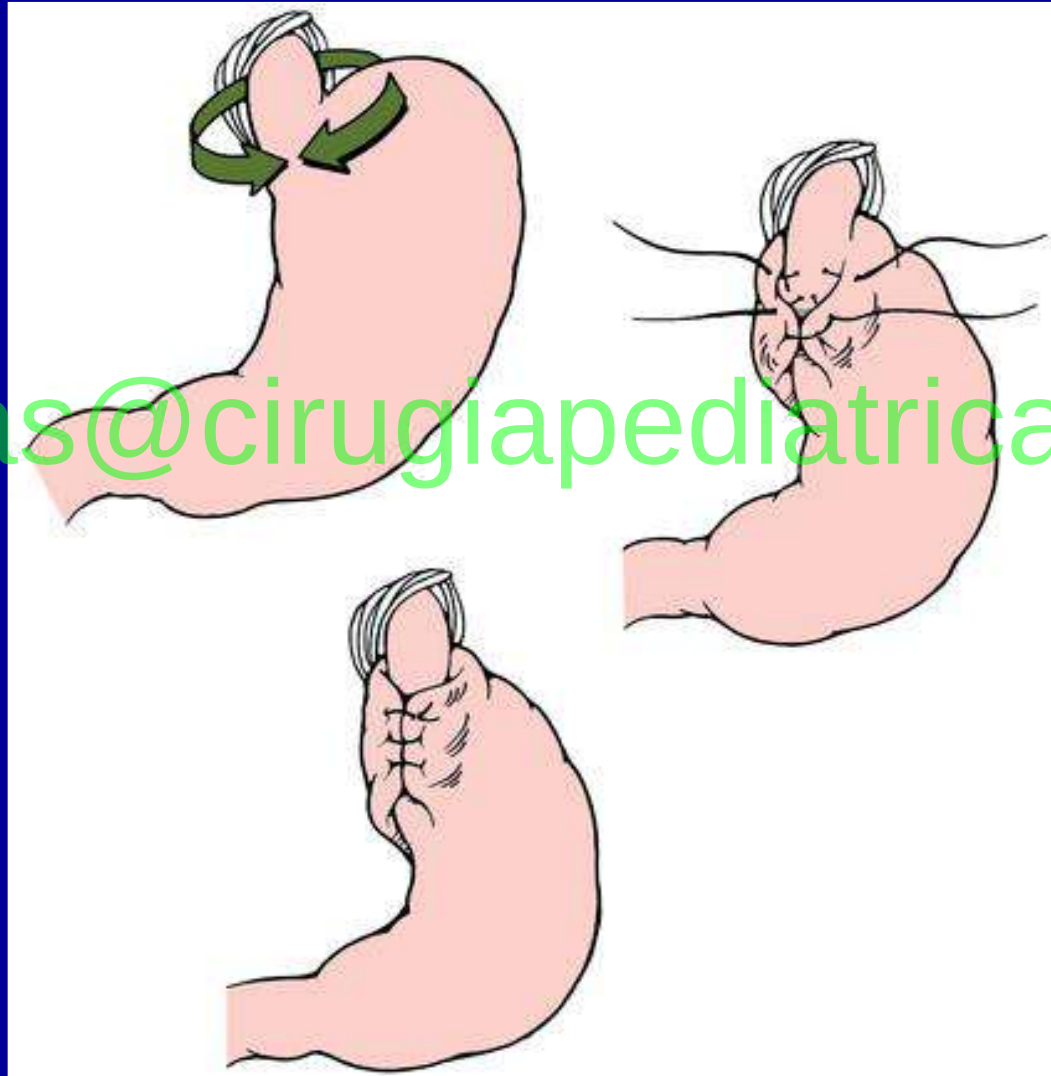
- No respuesta al tratamiento médico.
- Tratamiento médico prolongado.
- Estenosis esofágica.
- Esófago de Barrett.
- Hernia hiatal de gran tamaño.
- ALTE con PHmetría patológica c/ tto.

RGE - Preparación para cirugía

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- Dos sondas (orogástrica o nasogástrica) “ K10 ”
- Posición del paciente
- Torre laparoscópica a la izquierda del paciente o en cabecera
- Suturas e instrumental laparoscópico / convencional

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Técnicas:

-Thal

-Toupet

-NISSEN

RGE - Resultados Op. Nissen

- 95 % de curación a largo plazo (niños no neurológicos)
- Realimentación en las 1^a. 24 – 36 hs.

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- Complicaciones: Disfagia transitoria, “bloat syndrome”, dumping, perforación esofágica o estenosis.

FUNDOPLICATURA GÁSTRICA VIDEOLAPAROSCÓPICA

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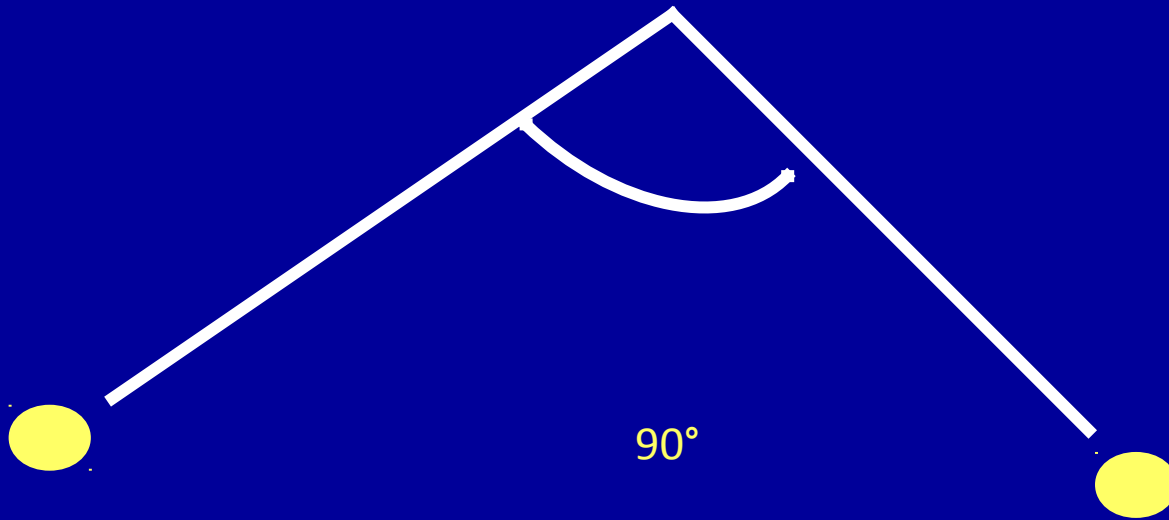
REFLUJO GASTROESOFÁGICO

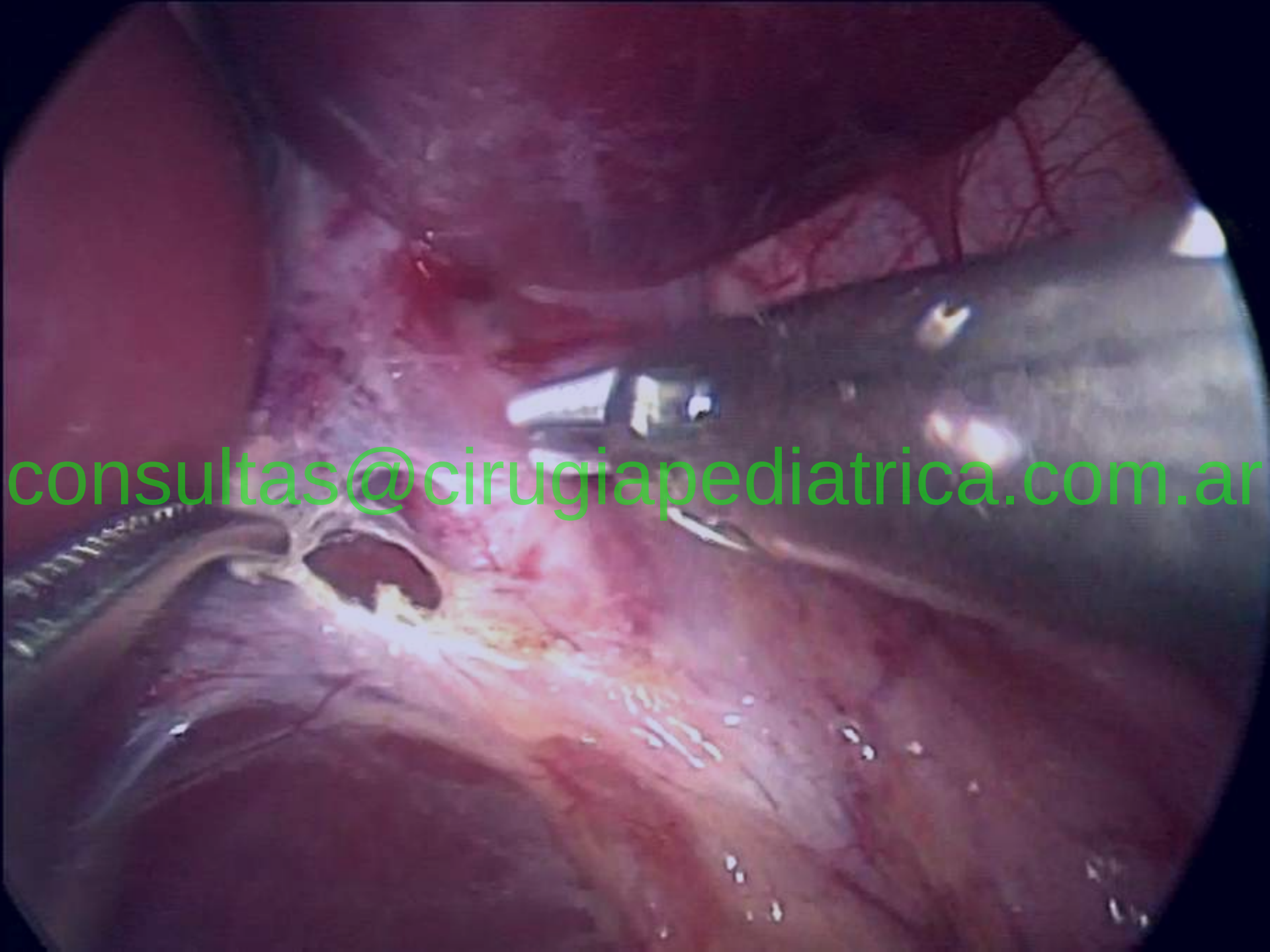
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PUNTOS TRACTORES HEPATICOS

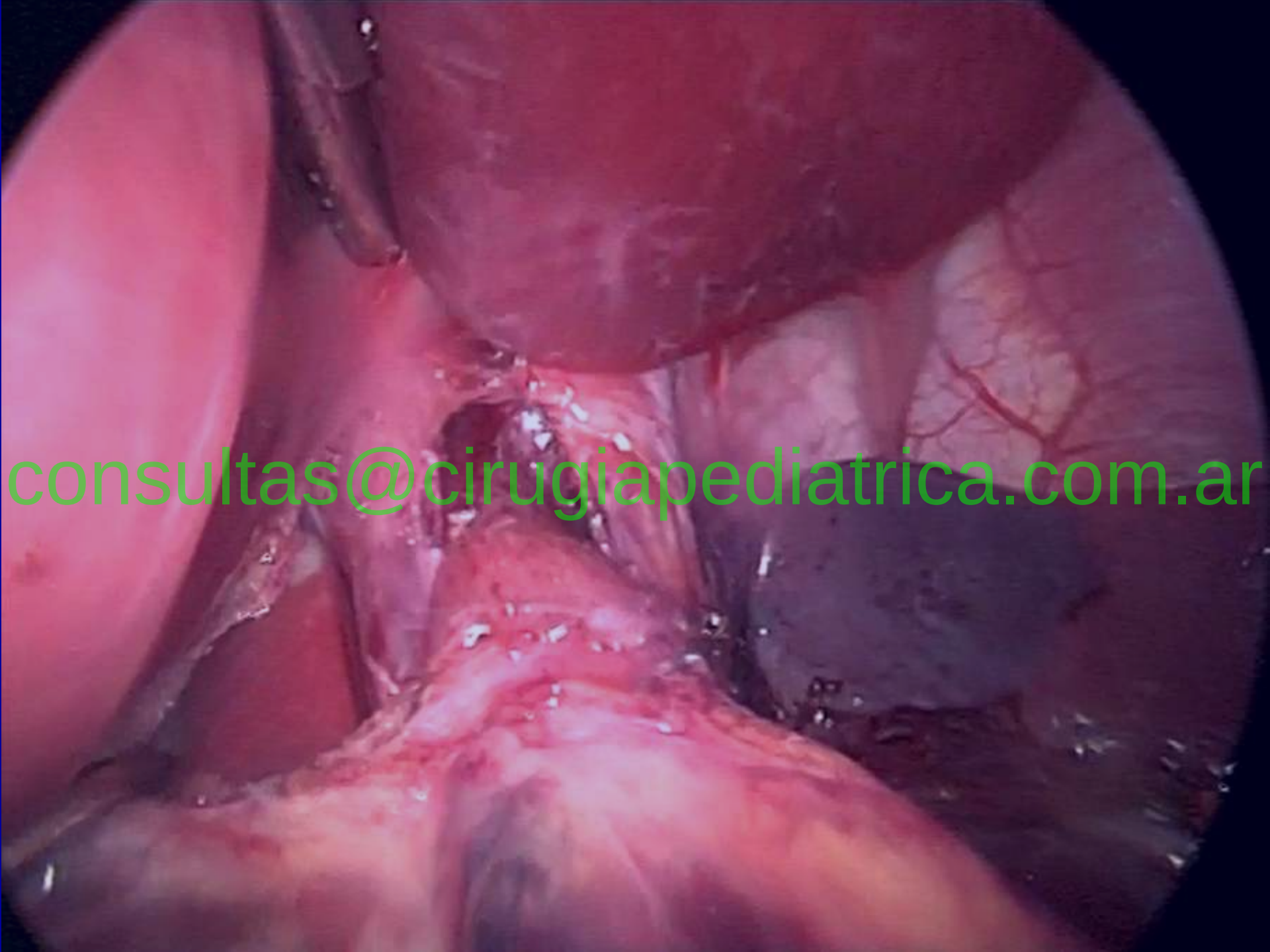
CENTRO
DEL CAMPO

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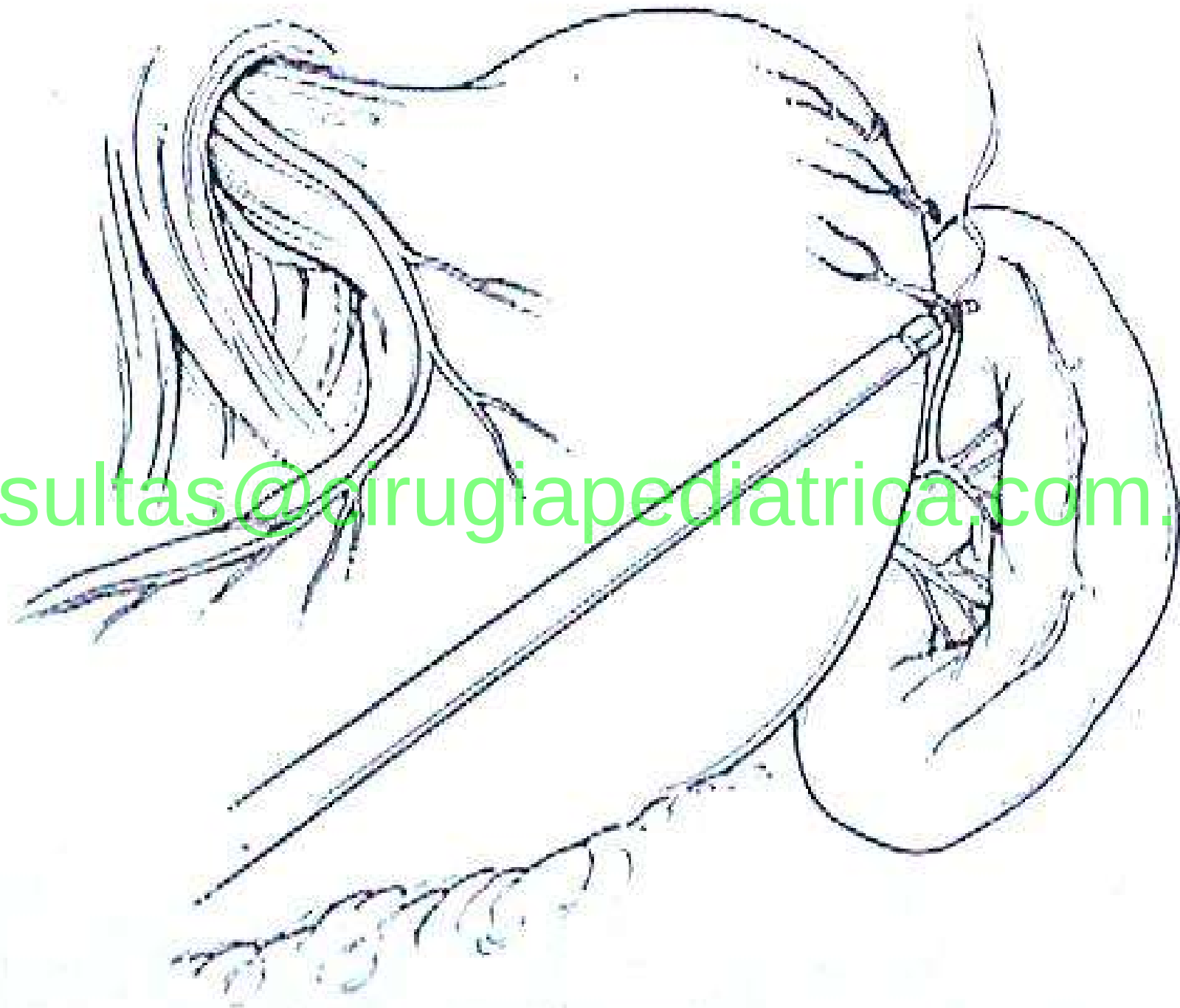
An endoscopic view of a surgical site, likely a laparoscopic procedure. The image shows a surgical incision with a metal retractor system in place. A pair of surgical forceps is visible, holding a piece of tissue. The surgical field is illuminated, showing various anatomical structures and blood vessels. A green watermark is overlaid across the center of the image.

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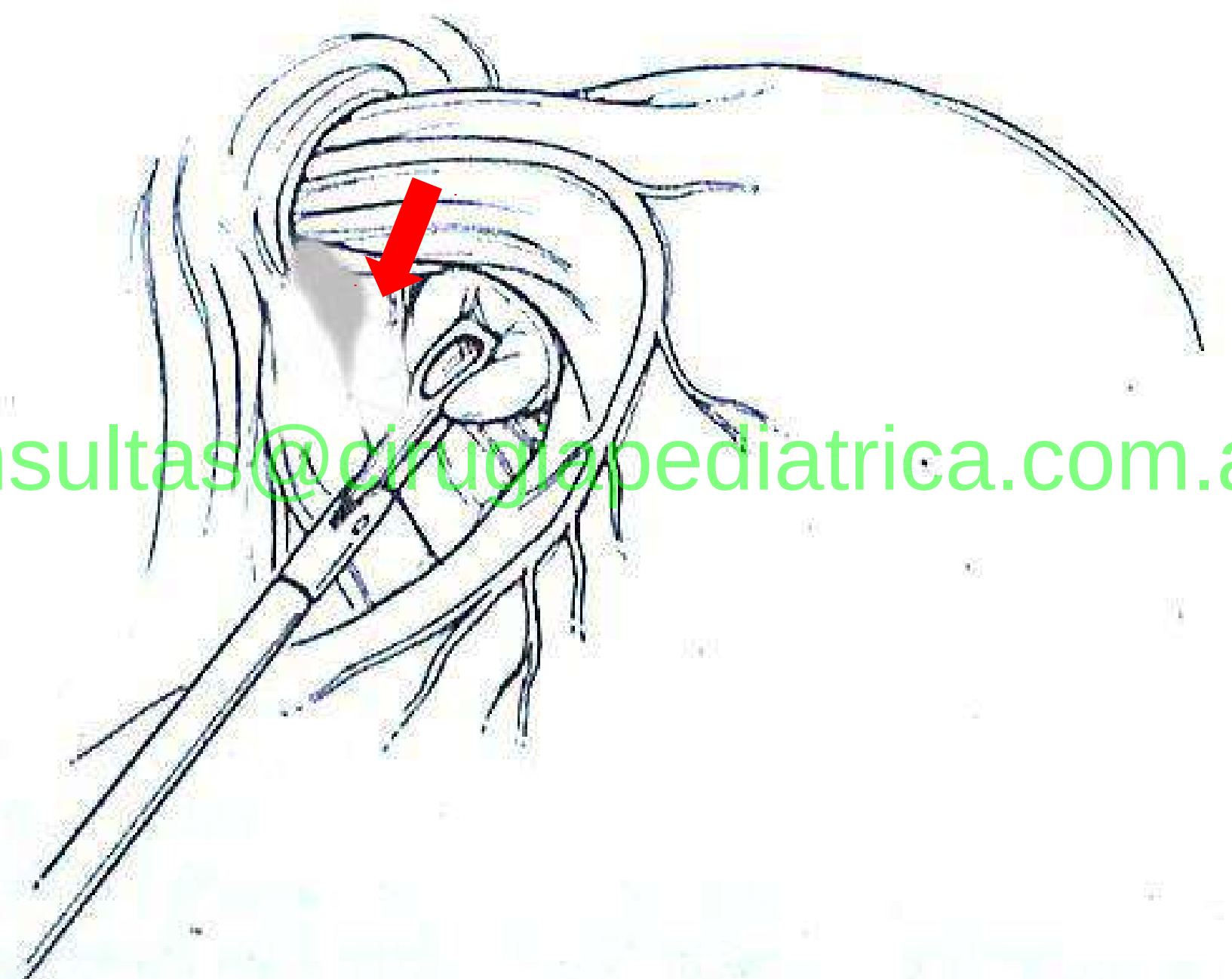


A laparoscopic view of a surgical procedure. The image shows a pinkish, fleshy organ, likely the stomach or esophagus, with surgical instruments (forceps and a stapler) visible. The organ is being manipulated and possibly stapled. The background is dark, and the overall scene is illuminated by surgical lights.

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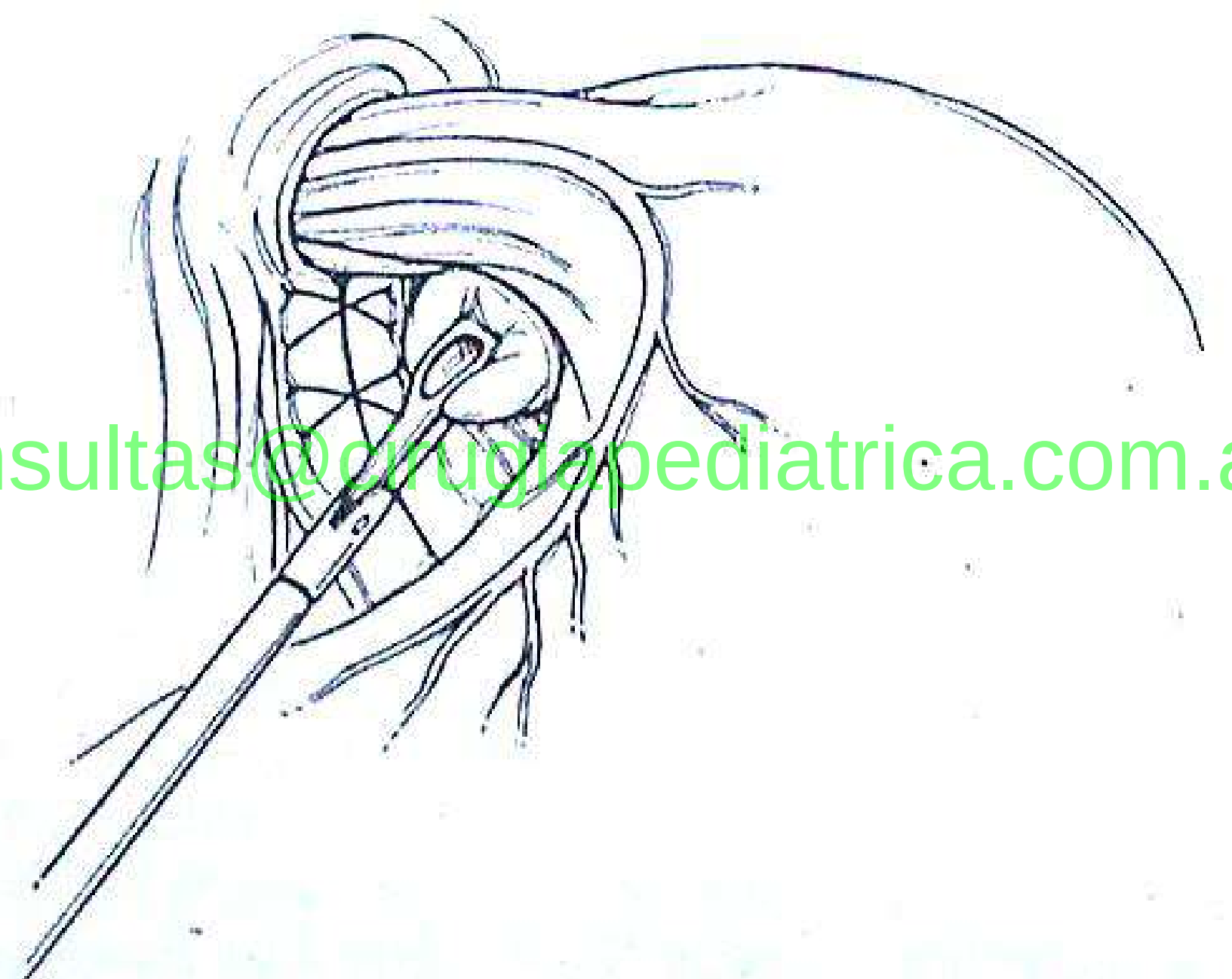
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A laparoscopic view of a surgical site. The image shows a reddish, moist, and vascularized tissue surface. Two black laparoscopic instruments are visible, one in the foreground and another slightly behind it. The background shows a large, rounded, reddish structure, possibly a portion of the liver or a large vessel. The overall scene is illuminated by a bright light source, creating a high-contrast, clinical appearance. A green watermark is overlaid across the center of the image.

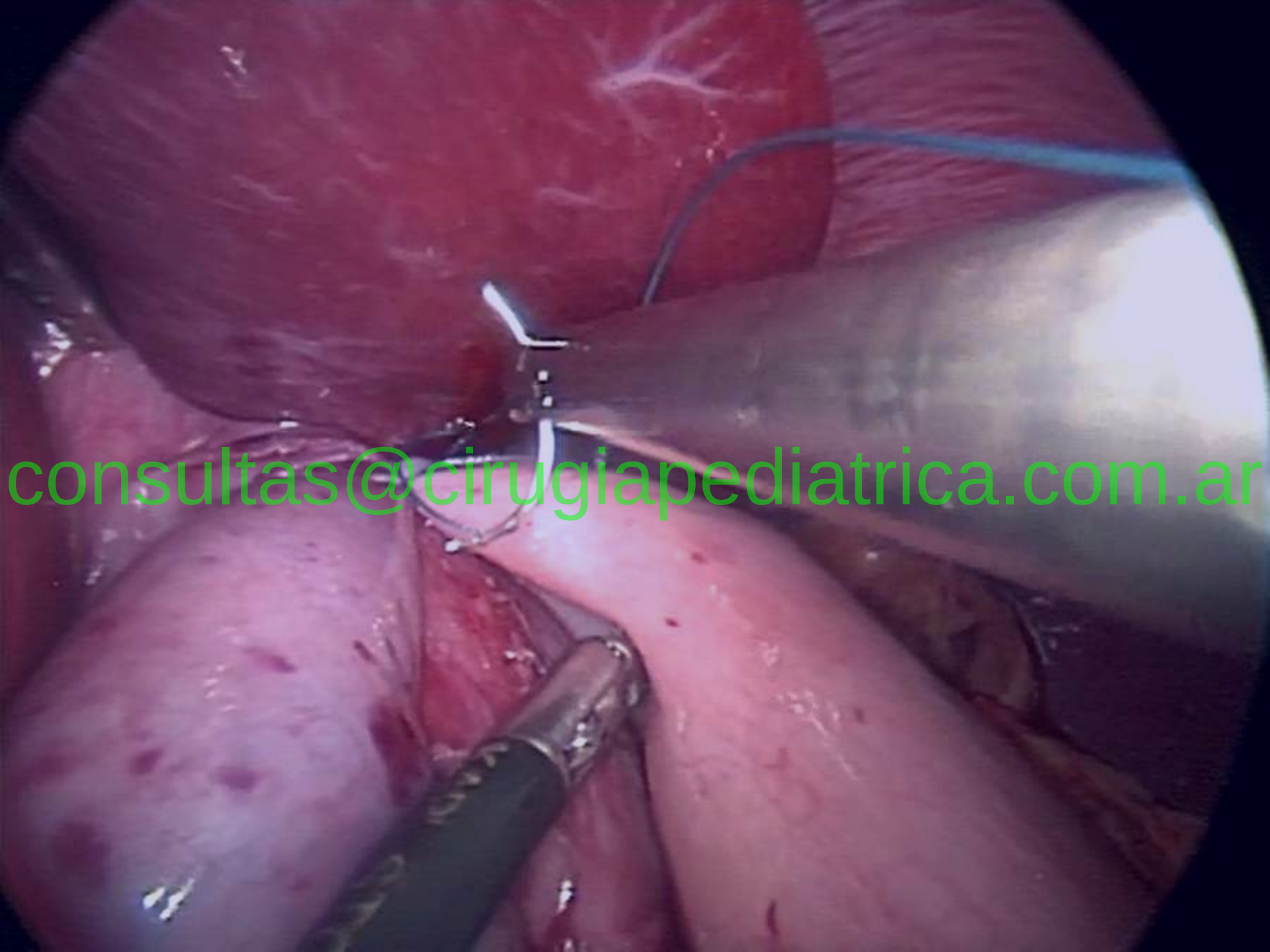
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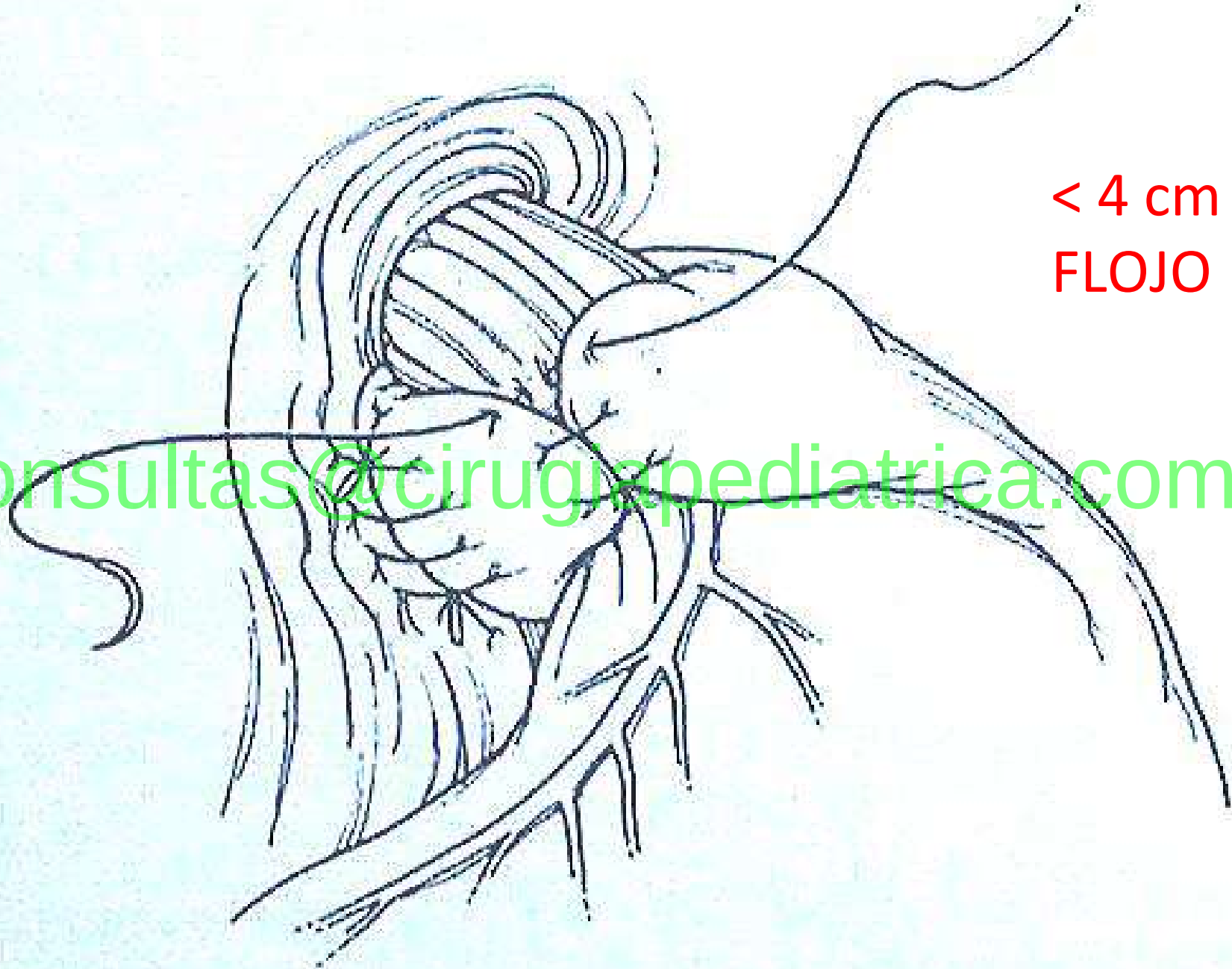




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An intraoperative laparoscopic view showing a surgical site. A blue suture is visible, securing a structure. The surrounding tissue is pinkish-red and appears moist. A watermark is overlaid on the image.

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< 4 cm
FLOJO

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An endoscopic view of a surgical site. A surgical instrument, likely a grasper or forceps, is visible in the upper right quadrant, holding a pinkish, elongated structure. The surrounding tissue is reddish and vascularized, with numerous small blood vessels visible. The overall scene is illuminated by a bright light source, creating a high-contrast, clinical appearance. A green watermark is overlaid across the center of the image.

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This is an intraoperative photograph showing a surgical site on a child's head. The skin is retracted, revealing a central incision. Several surgical instruments are visible, including a metal retractor on the left, a yellow suction tip on the right, and a blue-handled instrument at the bottom right. The surgical field is illuminated, and the surrounding area is covered with blue drapes. A white gauze pad is visible at the bottom of the frame.

“Niños con PC
tienen 3 veces más complicaciones”

12,8% vs 4,2%

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Desmontaje de funduplicatura 7,1%

*Fonkalsrud et al: "Surgical Treatment of GER in Children: A
combined Hospital Study of 7467 patients"
Pediatrics 101:419-422,1998*

RESULTADOS DE CIRUGÍA

n:7467 niños operados en 7 centros USA (1976-96)

44% con alt. SNC

64% Nissen, Thal 34%

Buen Resultado en **95% (s/alt. SNC)**
84,6%(c/alt. SNC)

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“Niños con PC que requieren una gastrostomía de alimentación, se indica cada día más una cirugía antirreflujo”.

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Muchas Gracias