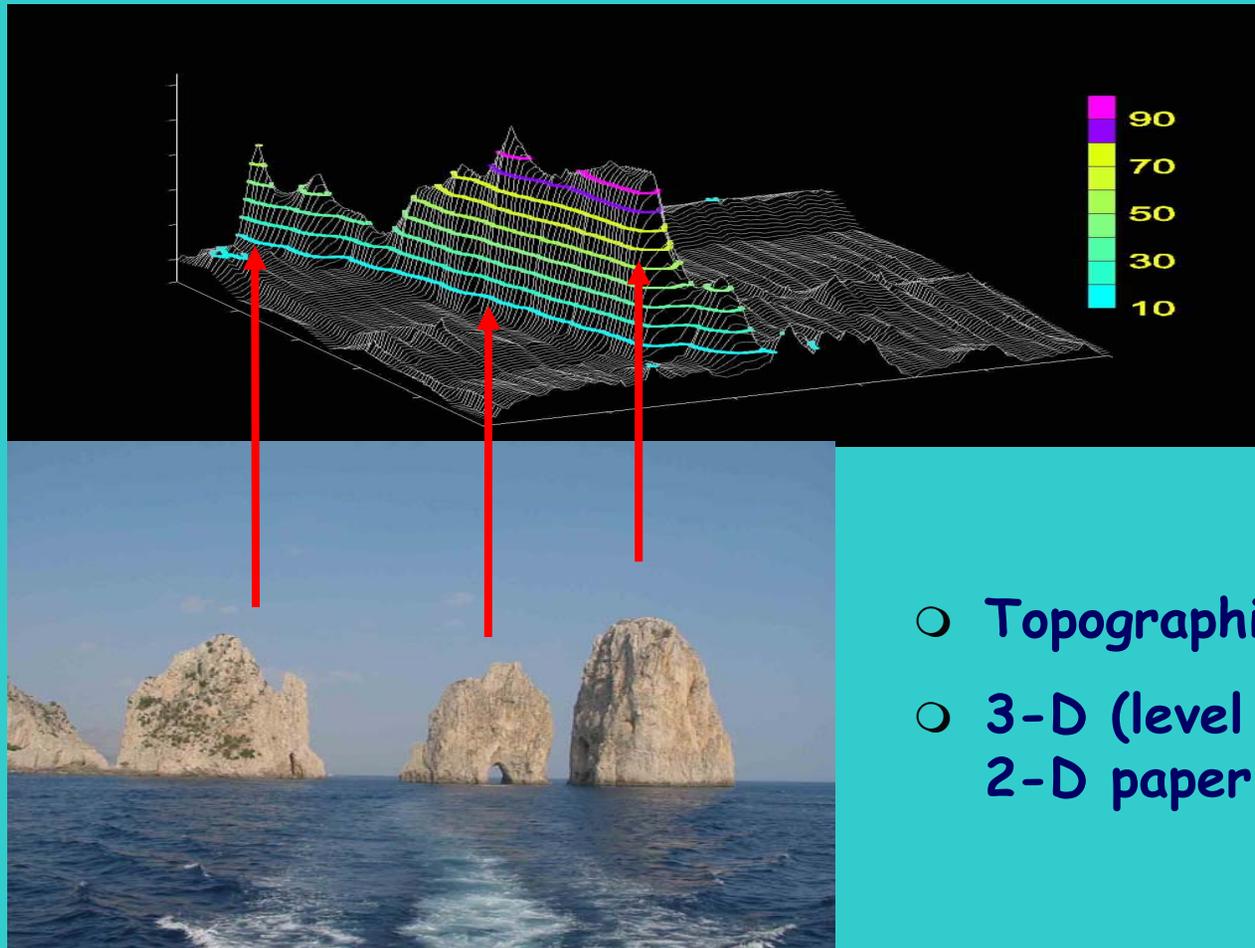


MANOMETRIA AD ALTA RISOLUZIONE

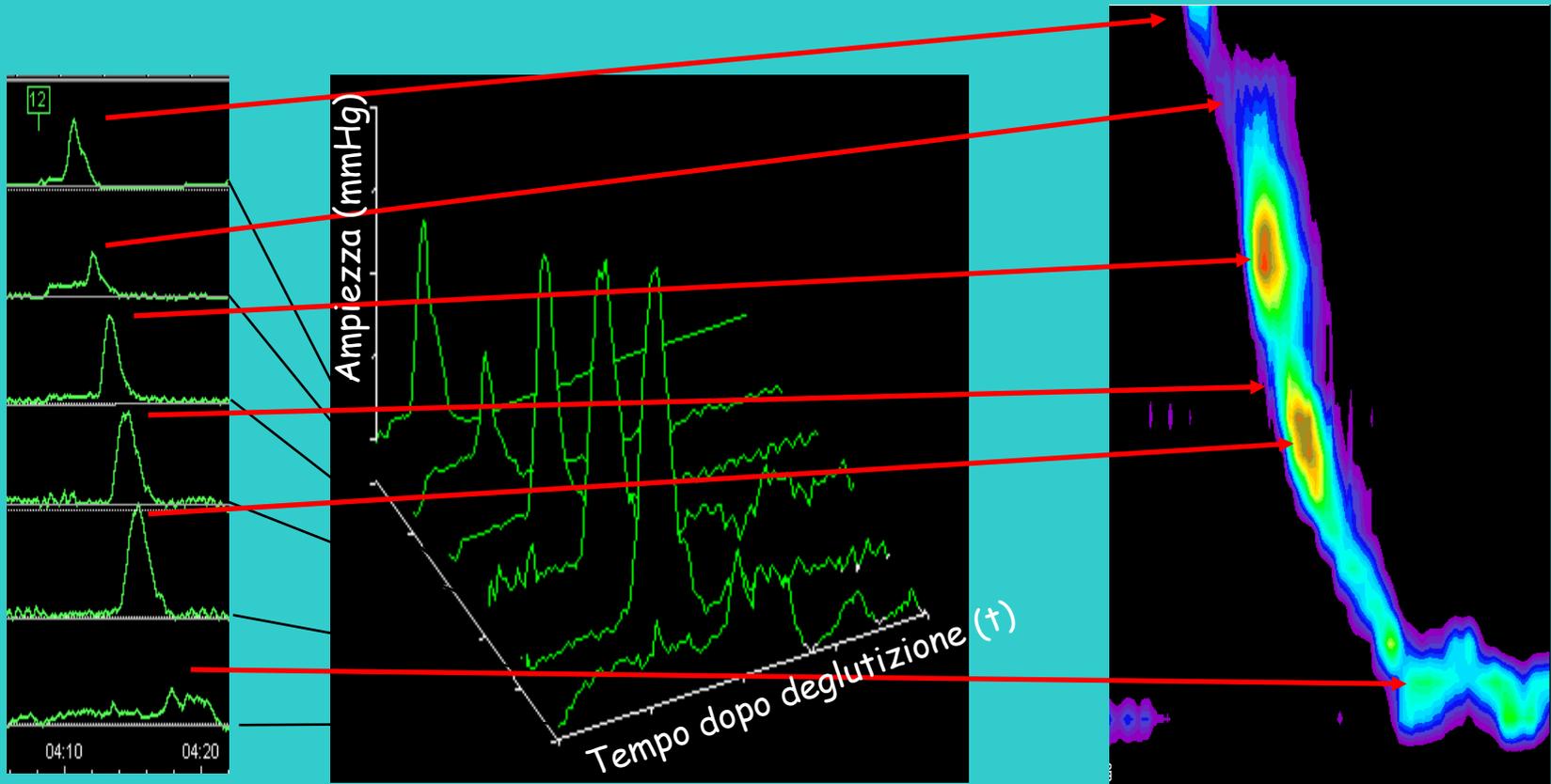
Prof.ssa Annamaria Staiano
Dipartimento di Pediatria,
Università "Federico II", Napoli



- Topographical maps
- 3-D (level information) on 2-D paper

MANOMETRIA AD ALTA RISOLUZIONE

- Dalla manometria convenzionale alla manometria ad alta risoluzione



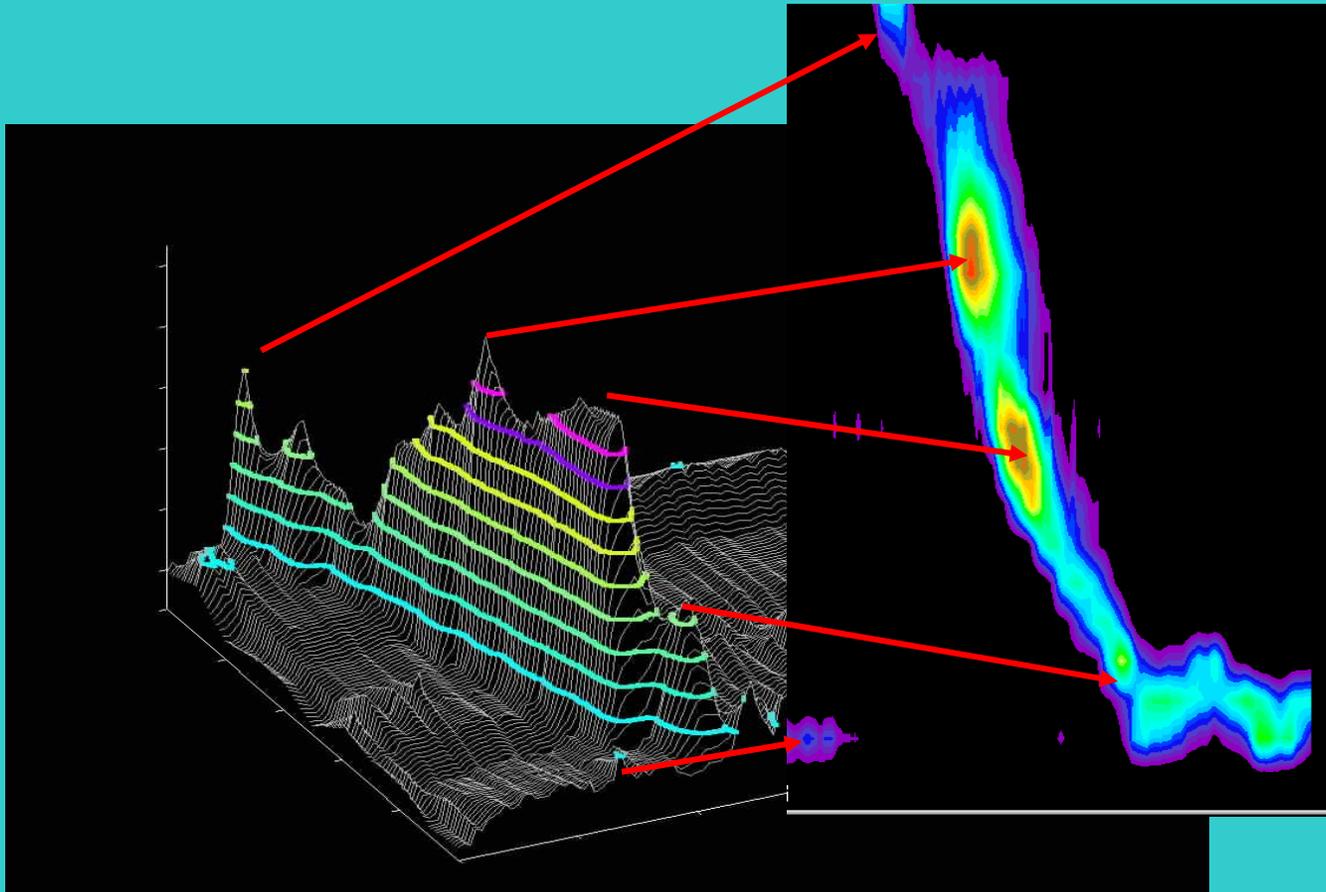
MANOMETRIA AD ALTA RISOLUZIONE

Elementi Fondamentali:

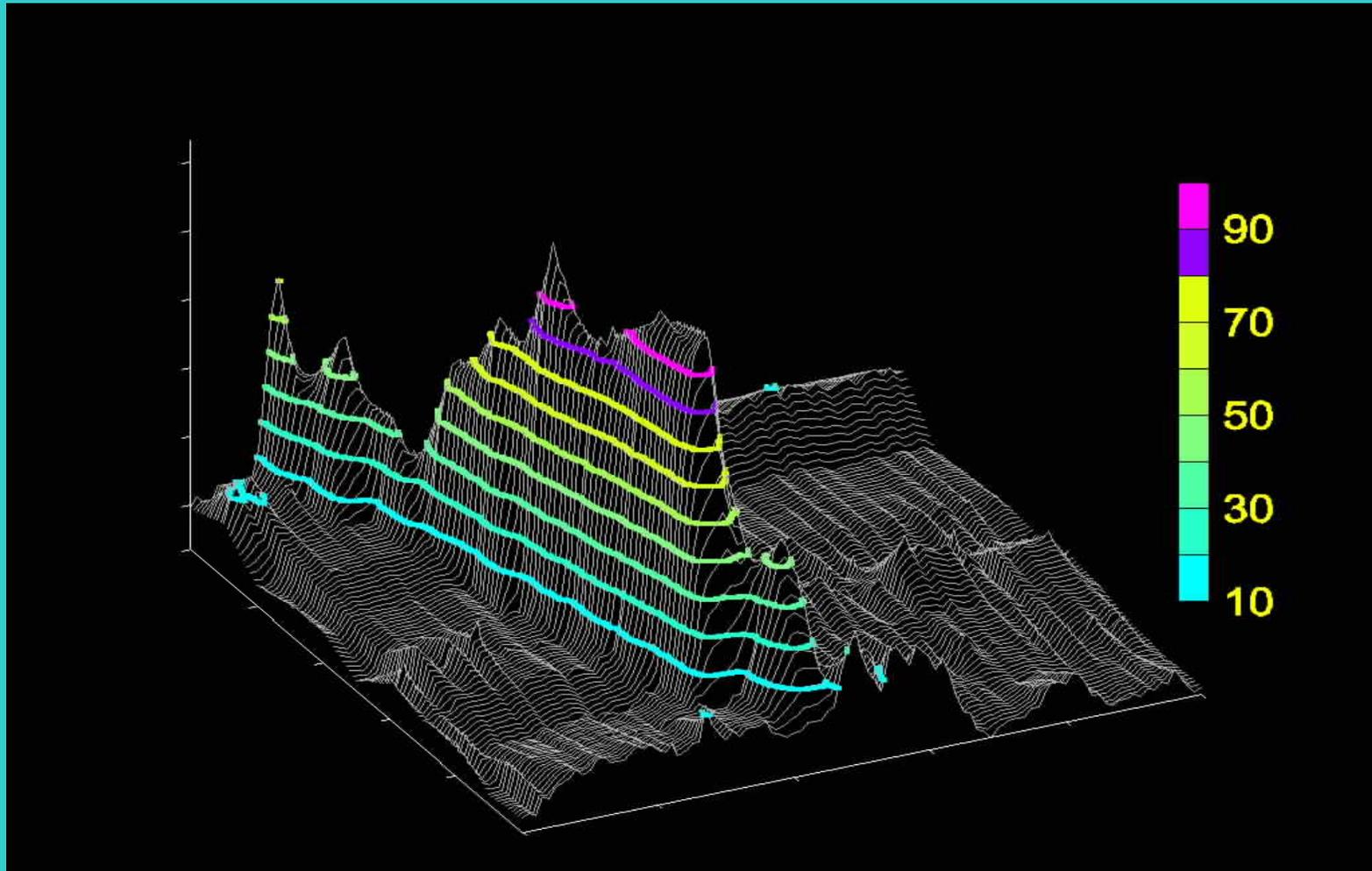
- 1) Punti di registrazione pressoria molteplici e ravvicinati*
- 2) Software per plottaggio*

MANOMETRIA AD ALTA RISOLUZIONE

- Uso dei colori. Valori uguali di pressioni raffigurati con lo stesso colore



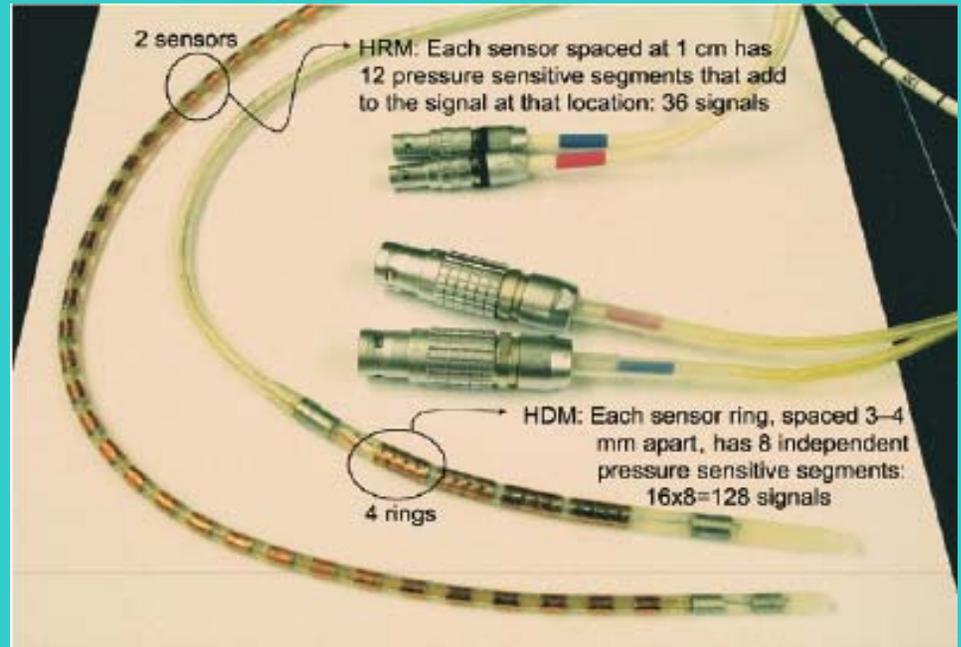
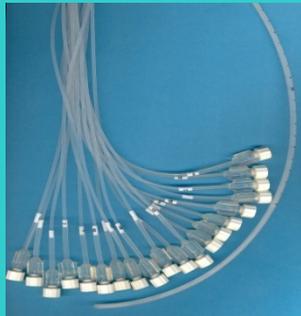
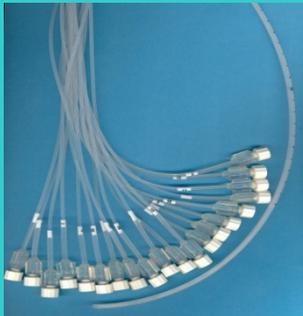
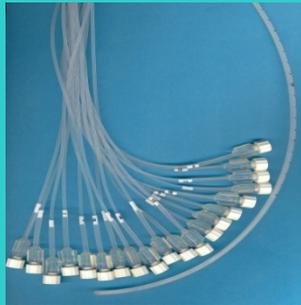
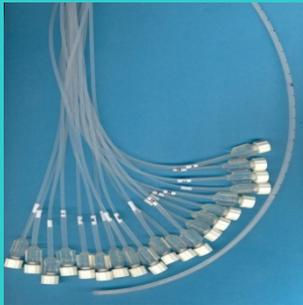
MANOMETRIA AD ALTA RISOLUZIONE



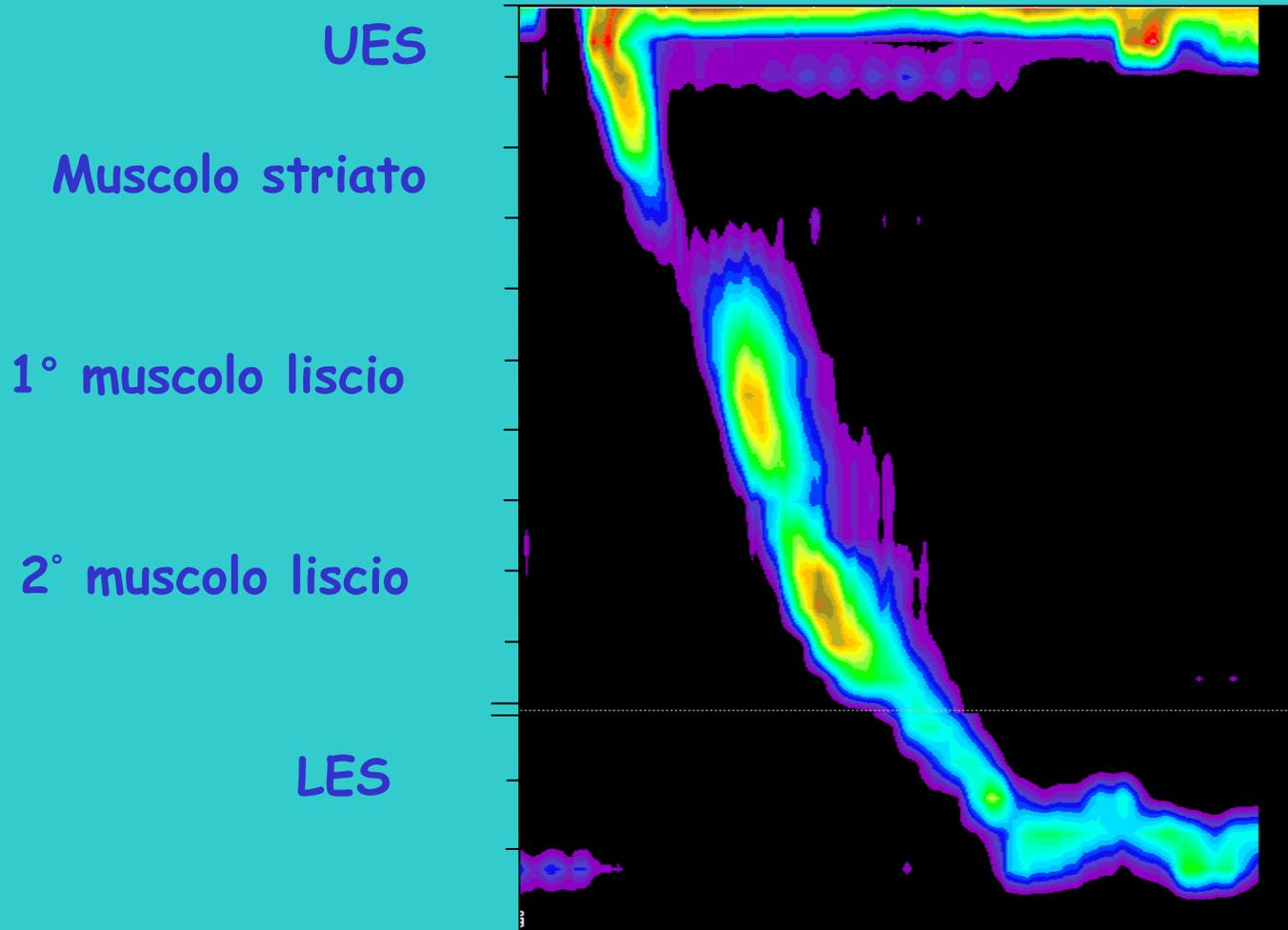
HIGH RESOLUTION MANOMETRY

Hardware for HRM

- Multi-channel catheter
 - Dent catheters are auto-claveable
 - easy cleaning
 - Low price compared to solid state
 - Buy 2-4 catheter for fast turn around time



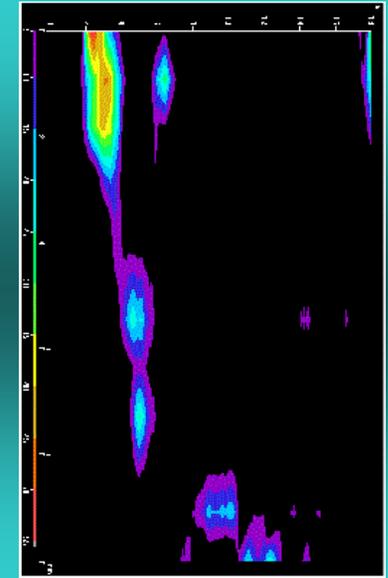
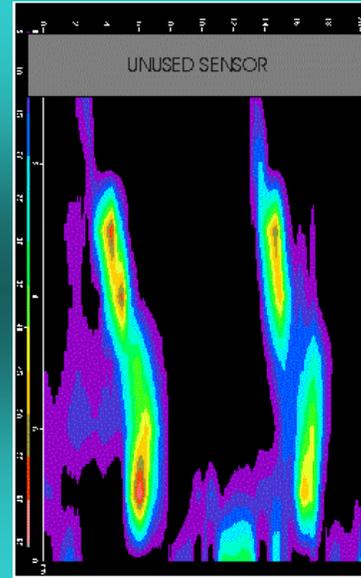
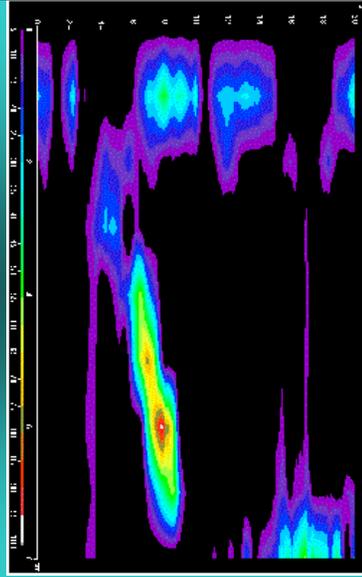
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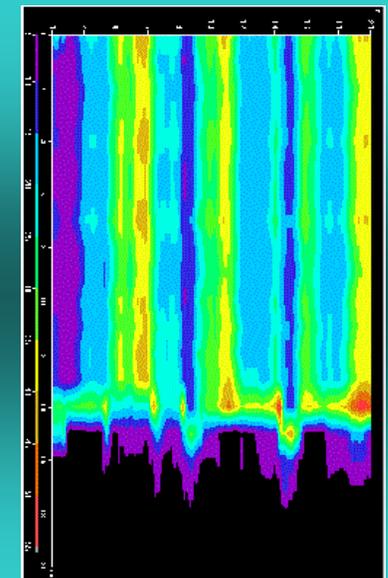
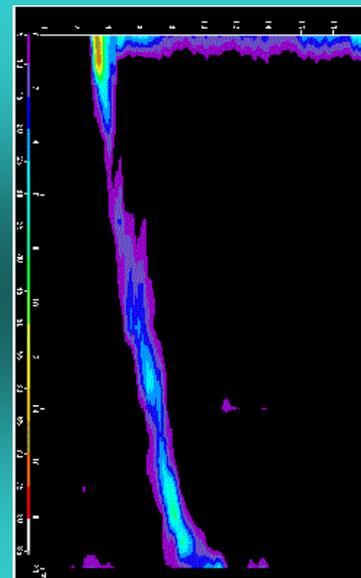
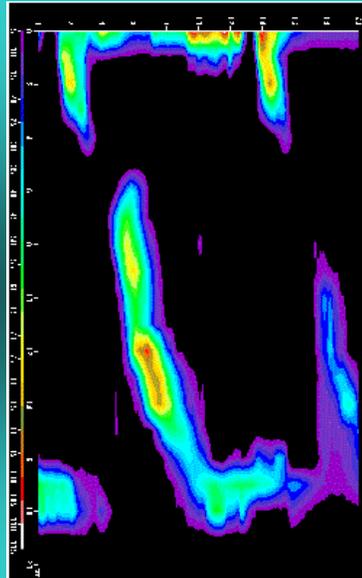
DISORDINI DELLA MOTILITA' ESOFAGEA

MANOMETRIA AD ALTA RISOLUZIONE

10-lumen
catheter

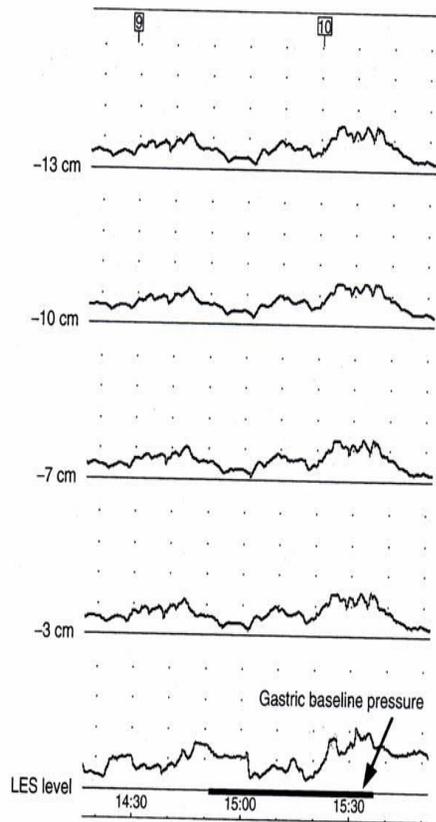


21-lumen
catheter



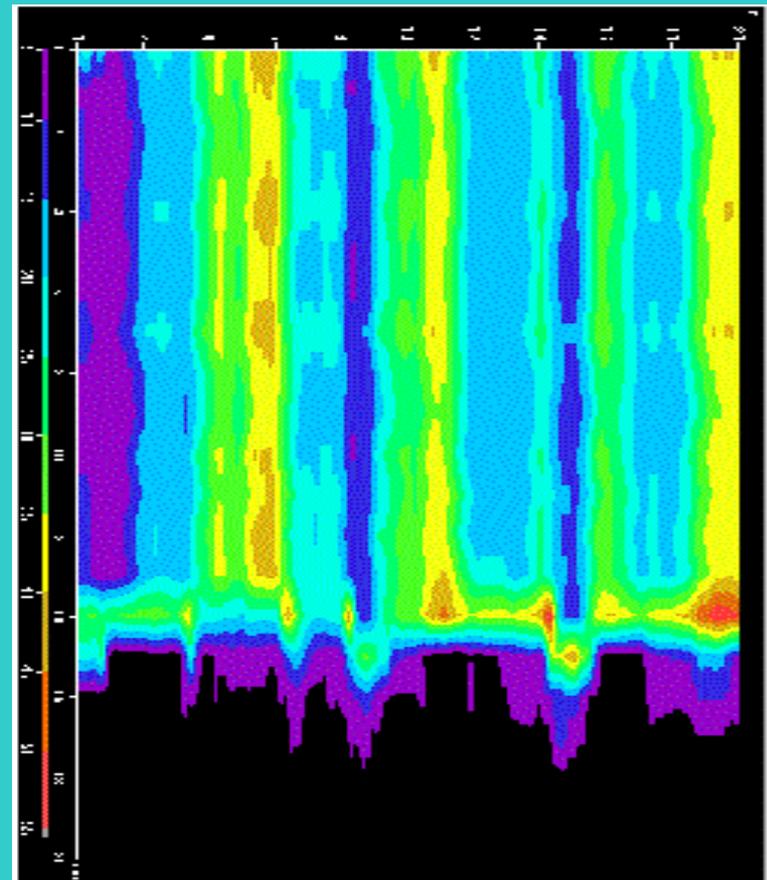
MANOMETRIA ESOFAGEA CONVENZIONALE

Tono basale del LES aumentato.
Rilasciamenti occasionali,
incompleti alla deglutizione.
Aperistalsi.



MANOMETRIA ESOFAGEA TOPOGRAFICA

Assenza normale topografia
peristaltica. Contrazioni isobariche
lungo tutto l'esofago che terminano
bruscamente a livello di un LES non
rilasciante



MANOMETRIA AD ALTA RISOLUZIONE

Box 2 HRM: practical advantages and disadvantages

Advantages

- ▶ Quick and easy positioning of catheter, pull-through not required
- ▶ Movement of the catheter relative to the LOS does not impair data quality
- ▶ Facilitates positioning of the pH probe for reflux studies
- ▶ Decreases time required for study procedure
- ▶ Normal and abnormal function easy to recognise on spatiotemporal plot

Disadvantages

- ▶ Expensive equipment
- ▶ Lack of experience with spatiotemporal plots brings risk of over-diagnosis of functionally insignificant oesophageal dysmotility