TRENDS IN POSTOPERATIVE ZENKER’S DIVERTICULUM MANAGEMENT: RESULTS OF THE AMERICAN BRONCHOESOPHAGOGICAL ASSOCIATION SURVEY

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Background
- Zenker’s diverticulum (ZD) is commonly treated by otolaryngologists
- Little published data on postoperative management
- Postoperative complications such as esophageal perforation may occur in the absence of clinical symptoms
- Increased scrutiny of surgeon’s resource utilization and healthcare costs

Objectives
To determine the practice patterns among members of the American Broncho-Esophagological Association (ABEA) with respect to:
- The types of procedures that they perform,
- Their years in practice
- The number of procedures per year that they perform
- Fellowship training

Methods
- An online questionnaire was designed via JotForm™ and then sent to members of ABEA
- Responses were analyzed using descriptive statistics

Results

- Most respondents use multiple techniques
- Majority of respondents admit patients for 23-hour observation after surgery
- Postoperative esophagography was more often utilized after transcervical technique than after the endoscopic stapler or CO2 laser technique
- Most respondents start a peroral diet postop day 1

Discussion
- The large number of respondents reporting fellowship training in laryngology may reflect a shift in referral patterns
- Increased use of the transcervical technique among respondents with more than 20 years of practice, or who perform more than 15 ZD procedures per year, may be due to increased management of patients with recurrent symptoms
- Longer duration and more invasive nature of procedure may contribute to the higher rate of admission after transcervical approach
- The perception that endoscopic treatment is safer may contribute to lower rates of postoperative esophagography and earlier resumption of oral diet after endoscopic approaches

Conclusions
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