

Quick reference guide

Issue date: August 2010

Barrett's oesophagus

Ablative therapy for the treatment of
Barrett's oesophagus

About this booklet

This is a quick reference guide that summarises the recommendations NICE has made to the NHS in Barrett's oesophagus: ablative therapy for the treatment of Barrett's oesophagus (NICE clinical guideline 106).

Introduction

Barrett's oesophagus can develop following chronic gastro-oesophageal reflux disease. It is characterised by abnormal changes in the oesophageal epithelium. In some patients, these may become dysplastic and lead to oesophageal cancer.

Oesophagectomy is the standard treatment for high-grade dysplastic Barrett's or intramucosal cancer (including T1a) but is associated with significant mortality and morbidity. Less invasive surgical techniques have been developed and are being used as alternatives.

This clinical guideline covers the use of ablative therapies (argon plasma coagulation, laser ablation, multipolar electrocoagulation, radiofrequency ablation and photodynamic therapy) and endoscopic mucosal resection for treating Barrett's oesophagus with high-grade dysplasia or with early intramucosal cancer.

Patient-centred care

Treatment and care should take into account patients' individual needs and preferences. Good communication is essential, supported by evidence-based information, to allow patients to reach informed decisions about their care. Follow advice on seeking consent from the Department of Health or Welsh Assembly Government if needed. If the patient agrees, families and carers should have the opportunity to be involved in decisions about treatment and care.

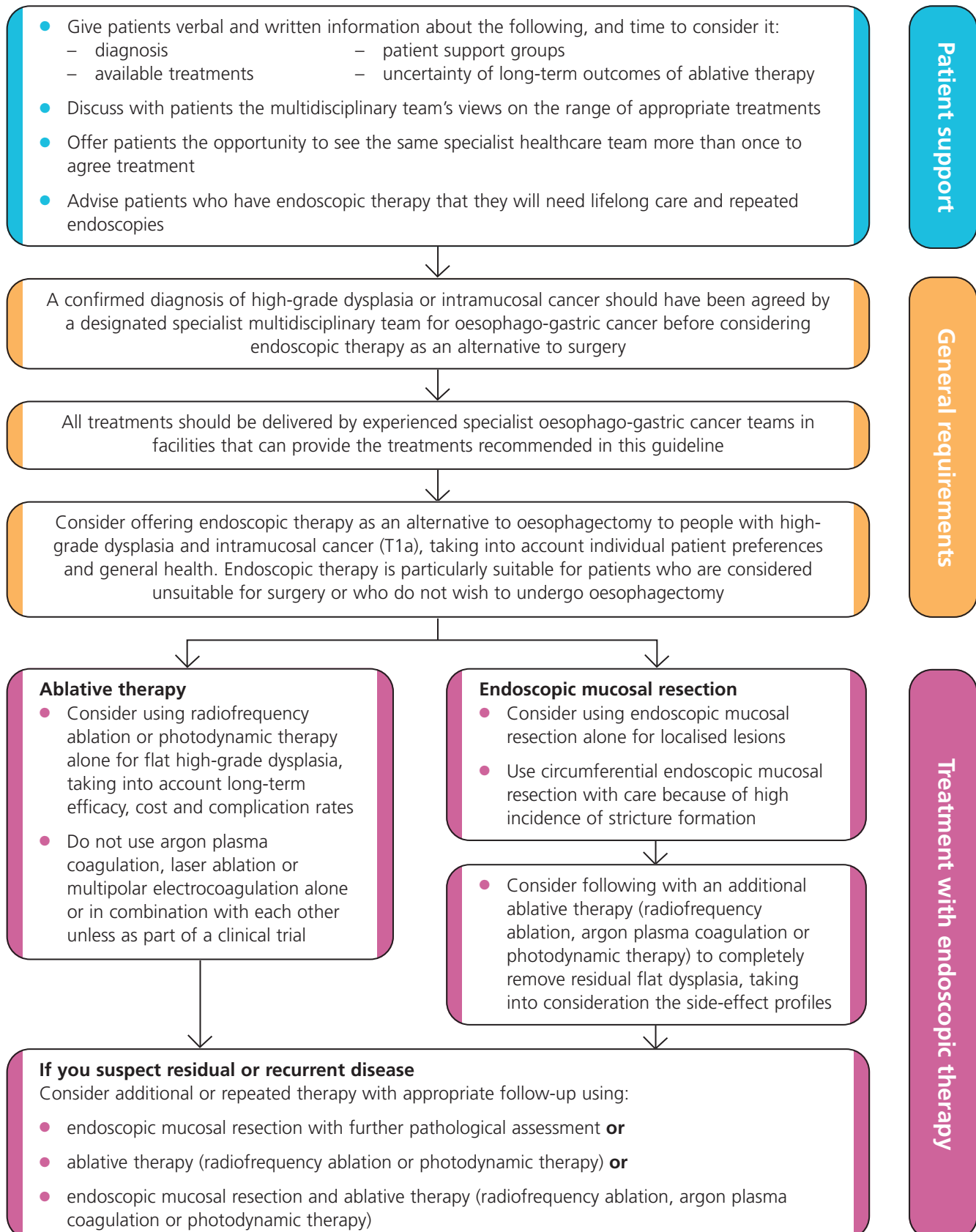
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NICE clinical guidelines are recommendations about the treatment and care of people with specific diseases and conditions in the NHS in England and Wales.

This guidance represents the view of NICE, which was arrived at after careful consideration of the evidence available. Healthcare professionals are expected to take it fully into account when exercising their clinical judgement. However, the guidance does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer, and informed by the summary of product characteristics of any drugs they are considering.

Implementation of this guidance is the responsibility of local commissioners and/or providers. Commissioners and providers are reminded that it is their responsibility to implement the guidance, in their local context, in light of their duties to avoid unlawful discrimination and to have regard to promoting equality of opportunity. Nothing in this guidance should be interpreted in a way that would be inconsistent with compliance with those duties.

Care pathway



Further information

Ordering information

You can download the following documents from www.nice.org.uk/guidance/CG106

- A quick reference guide (this document) – a summary of the recommendations for healthcare professionals.
- 'Understanding NICE guidance' – a summary for patients and carers.
- The full guideline – all the recommendations, details of how they were developed, and reviews of the evidence they were based on.

For printed copies of the quick reference guide or 'Understanding NICE guidance', phone NICE publications on 0845 003 7783 or email publications@nice.org.uk and quote:

- N2247 (quick reference guide)
- N2248 ('Understanding NICE guidance').

Implementation tools

NICE has developed tools to help organisations implement this guidance (see www.nice.org.uk/guidance/CG106).

Related NICE guidance

For information about NICE guidance that has been issued or is in development, see www.nice.org.uk

Published

NICE has published a clinical guideline on dyspepsia (CG17; 2004) and interventional procedure guidance on:

- Photodynamic therapy for Barrett's oesophagus (IPG350; 2010).
- Epithelial radiofrequency ablation for Barrett's oesophagus (IPG344; 2010).
- Endoscopic radiofrequency ablation for gastro-oesophageal reflux disease (IPG292; 2009).
- Endoscopic augmentation of the lower oesophageal sphincter using hydrogel implants for the treatment of gastro-oesophageal reflux disease (IPG222; 2007).
- Photo-dynamic therapy for early oesophageal cancer (IPG200; 2006).
- Thoracoscopically assisted oesophagectomy (IPG189; 2006).
- Endoluminal gastroplication for gastro-oesophageal reflux disease (IPG115; 2005).
 - Endoscopic injection of bulking agents for gastro-oesophageal reflux disease (IPG55; 2004).

Under development

Endoscopic submucosal dissection of oesophageal dysplasia and neoplasia. NICE interventional procedure guidance. Publication expected September 2010.

Updating the guideline

This guideline will be updated as needed, and information about the progress of any update will be available at www.nice.org.uk/guidance/CG106

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