Endoscopic stapler-assisted diverticuloesophagostomy for Zenker's diverticulum: patient satisfaction and subjective relief of symptoms

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BACKGROUND: We assessed the results of endoscopic stapler-assisted diverticuloesophagostomy for Zenker's diverticulum, with emphasis on patient satisfaction and subjective relief of symptoms. METHODS: A retrospective cohort analysis was performed on all patients operated on from 1997 to 2000. Patients' charts were reviewed with respect to intraoperative and postoperative complications. The severity of preoperative and postoperative symptoms by patient self-assessment was compared by means of a 4-point scale (0-3) on a standardized questionnaire, as well as assessment of patient satisfaction (poor, fair, moderate, high). RESULTS: Thirty patients (22 men, 8 women) with a mean age of 72 years (range, 42-97 years) were part of the study. The mean follow-up was 13.2 months (range, 2-39 months). No major intraoperative or postoperative complications were observed. The most frequent preoperative symptoms were regurgitation of undigested food and dysphagia for solid consistencies (87%). Both of these preoperative symptoms were improved from a mean preoperative score of 2.2 and 2.7 to 0.1 and 0.4, respectively (P <.0001). Postprandial coughing (32%), halitosis (21%), and globus sensation (32%) were less common but also significantly improved. All but 1 patient (96%) were highly satisfied with the procedure. CONCLUSIONS: Endoscopic stapler-assisted treatment of Zenker's diverticulum offers a very low complication rate, a very high degree of symptom relief, and patient satisfaction.