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Endoluminal Gastroplication – May 2002

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Aim

To assess the safety, effectiveness, and cost-effectiveness of endoluminal gastroplication (ELGP) for gastroesophageal cancer and under what circumstances such services should be supported with public funding.

Conclusions and results

The evidence for the efficacy and safety of ELGP is based on one small, published study with no control group. Hence, the review is primarily a critical appraisal of the one published study that met the eligibility criteria on ELGP. Below are recommendations on the safety, effectiveness, and cost-effectiveness of the procedure.

Safety: Limited evidence was available to assess the safety of ELGP in patients with gastroesophageal reflux disease (GERD). From the data provided in the one case-series paper, it would appear that a minority of patients suffered adverse events 6 months after the procedure. Some of the adverse events may be explained by the limited experience of surgeons in performing the procedure; however, more data are needed before a decision can be made regarding the safety of the procedure in patients with GERD.

Effectiveness: Data at 6-month followup, from the one case-series paper, indicate that endoluminal gastroplication may reduce some symptoms of GERD. However, the paucity of good-quality data limits the ability to draw any conclusions regarding the efficacy of this procedure. Further research focusing on randomized trials is needed in this area.

Cost effectiveness: There is a paucity of data on the effectiveness of ELGP beyond 6 months of followup. It appears that medication use at 6 months is reduced, but the duration of this effect is unknown due to the limited data available on this procedure. A comprehensive economic evaluation should be conducted on ELGP when sufficient data are available.

Recommendation

Since there is insufficient evidence pertaining to endoluminal gastroplication for gastroesophageal reflux disease, MSAC recommended that public funding should not be supported at this time for the procedure.

Method

The National Health and Medical Research Council (NHMRC) Clinical Trials Centre at the University of Sydney conducted a systematic review of the literature (with eligibility criteria defined a priori) on the role of endoluminal gastroplication. The following sources were searched from commencement to December 2001: MEDLINE, PreMedline, International Pharmaceutical Abstracts, Best Evidence, Current Contents, EMBASE, the Cochrane Library, ISTAHC, and the NHS Databases, DARE, EED, and HTA. Internet and health technology assessment agency sources were also searched.

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