

Barium swallow (or esophagram): An x-ray imaging test (sometimes called an upper GI series) used to visualize the structures of the esophagus. It can help spot anatomic abnormalities such as a hiatal hernia, blockages, inflammation of the esophagus and free reflux.

Barrett's esophagus: The changing of normal cells of the esophagus into abnormal cells due to gastroesophageal reflux disease (GERD). This is considered a treatable pre-cancerous condition of the esophagus and is monitored with biopsy during EGD.

Endoscope: A flexible tube and optical system for viewing the inside of the esophagus and stomach.

Endoscopy: A test typically used to diagnose GERD symptoms using an endoscope, sometimes referred to as an EGD.

Esophagus: The muscular tube that carries swallowed food and liquids from the mouth to the stomach.

Esophagitis: Inflammation or irritation to the lining of the esophagus. It is often caused by acid reflux and the reflux of other digestive fluids from the stomach. The most severe grades involve erosions and a breakdown of the mucus membrane in the esophagus.

EsophyX® device: A device designed to reconstruct the gastroesophageal valve (GEV) and help restore the GEV's function as a reflux barrier. It is used to perform the Transoral Incisionless Fundoplication (TIF) 2.0 procedure.

Gastritis: Inflammation of the stomach.

Gastroenterologist: A physician who specializes in the diagnosis and treatment of diseases of the digestive system.

Gastroesophageal reflux disease (GERD): A chronic condition in which the gastroesophageal valve (GEV) allows gastric contents to reflux (wash backwards) into the esophagus, causing heartburn and possible injury to the esophageal lining. The stomach produces hydrochloric acid and other digestive enzymes after a meal to aid in the digestion of food. The cells that line the stomach are coated with a protective mucus that can withstand gastric contents, while the cells that line the esophagus lack the same protection.

H₂-receptor antagonists (also called H₂ blockers): A type of medication to manage the symptoms of GERD by decreasing or eliminating the production of gastric acid. Examples include Pepcid® (famotidine) and Zantac® (ranitidine).

Hiatal hernia: The protrusion of the upper portion of the stomach into the chest cavity because of an enlarged opening in the diaphragm. This is a common finding when evaluating reflux symptoms and requires repair.

Hiatal hernia repair: A laparoscopic procedure designed to tighten the opening for the esophagus in the diaphragm. This procedure includes a fundoplication and the TIF procedure can be used for this portion of the repair.

Heartburn: A burning sensation in the area behind the breastbone caused by the reflux of acid contents of the stomach into the lower esophagus. This reflux symptom has no connection to cardiovascular disease.

Laparoscopic: A minimally invasive procedure where only small incisions are made to look at the abdominal organs.

Lower esophageal sphincter (LES): A valve located at the junction of the esophagus and stomach that relaxes to let food pass through and closes to keep stomach contents from backing up (reflux).

Peptic ulcer: An ulceration of the mucous membrane of the esophagus, stomach or duodenum caused by the action of the acid gastric juice.

Portal hypertension: GERD frequently occurs in patients with portal hypertension, an increased blood pressure in the vein draining into the liver, often caused by chronic liver disease or cirrhosis.

Proton pump inhibitor (PPI): A type of medication prescribed by a healthcare professional to help manage a patient's GERD symptoms by decreasing or eliminating the production of gastric acid. Some examples include Nexium® (esomeprazole), Prilosec® (omeprazole) or Prevacid® (lansoprazole).

Scleroderma: A chronic, autoimmune disease of the connective tissue often affecting the skin, joint, kidneys, and lungs, as well as the esophagus.

Stricture: An abnormal narrowing (e.g. within the esophagus).

Transoral Incisionless Fundoplication (TIF®) procedure: An incisionless procedure for patients with chronic GERD. The TIF procedure with the EsophyX device is performed without the need for external incisions through the skin so there's no scars. It offers patients who require an anatomical repair another treatment option to correct the underlying anatomical causes of GERD.