

# Barrett's Esophagus



## What is Barrett's esophagus?

Barrett's esophagus is a condition resulting from ongoing irritation of the esophagus where its normal lining is replaced by the type of lining that is normally found in the intestine. Patients with Barrett's esophagus lack symptoms that are noticeably different from gastroesophageal reflux disease (GERD), the underlying irritation in most cases.

## What causes Barrett's esophagus?

Over time, the corrosive stomach acid from GERD causes damage to the esophagus. If acid reflux is not controlled, the surface and deeper layers of esophageal tissue are affected. Although there are no specific symptoms of Barrett's, patients may have complaints of symptoms of acid reflux such as heartburn, an unexplained cough, or indigestion.

## Who gets Barrett's esophagus?

Although anyone can develop Barrett's esophagus, some people may have a higher risk of developing the condition if they are between the ages of 35–50 or older and have had at least five years of GERD symptoms (heartburn). The condition is especially prevalent among middle-aged Caucasian men who have had heartburn for years.

Although Barrett's affects men more than women, its overall occurrence is small, less than 1 percent in all U.S. adults. On average, most people are diagnosed at age 50 or over. Studies also report that the number of people diagnosed with Barrett's who actually develop cancer is very low, about 5 percent or fewer.

## How is Barrett's esophagus diagnosed at the lab?

Barrett's esophagus is discovered during an endoscopy procedure, during which a small tube with a camera is inserted through the mouth and into the esophagus allowing the lining of the esophagus to be viewed.

The healthcare provider performing the endoscopy will be able to see if the normally pink esophagus tissue has red and inflamed areas. In Barrett's esophagus, an area of abnormal red tissue will be visible that extends upward into the esophagus from the point where the stomach and esophagus connect. A small tissue sample (biopsy) will be taken.

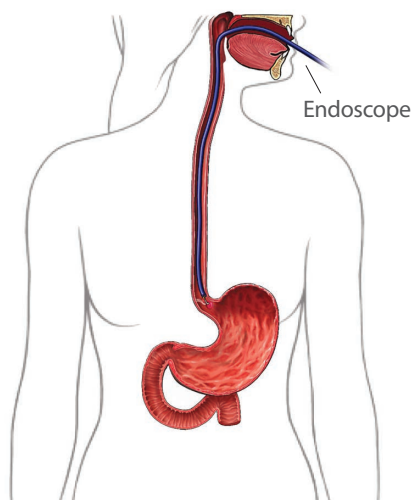
Tissue samples removed during an endoscopy are sent to a pathology lab. There, the tissue is prepared on glass slides and reviewed by a pathologist (a doctor who has specialized in the microscopic diagnosis of disease), preferably specializing in diseases of the gastrointestinal tract.

The pathologist views the tissue under a microscope looking for abnormal cellular changes, as well as the presence of any precancerous or cancerous cells. The

pathologist interprets the findings in the context of the clinical information provided by the patient's healthcare provider, and the diagnosis of Barrett's esophagus is usually made based on a combination of the biopsy report and the patient's specific circumstances, including symptoms. The pathologist will confirm the diagnosis and determine whether dysplasia (a pre-cancerous change of cells), or cancer is present.



## VIEWING THE ESOPHAGUS



An **endoscopy procedure** uses a small tube with a camera inside that is inserted through the mouth and into the esophagus.

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At Miraca Life Sciences, difficult and unusual cases are reviewed together by our specialists at large multi-headed microscopes to ensure the most accurate and definitive diagnoses. The pathologist creates a pathology report with all the important findings to help the healthcare provider decide treatment.

## How is Barrett's esophagus treated?

Since Barrett's esophagus is related to GERD, medications are given to treat the reflux symptoms. Acid suppression is the mainstay of therapy, and patients may need



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to be on proton pump inhibitor medication for years. If dysplasia or cancer is present, surgery or topical therapy may be indicated. The type of surgery varies, ranging from surgical excision of the inflamed tissue to ablation, which is the use of electrical energy to remove the diseased cells.

It is very important for patients to take any medications as prescribed, and to follow up on their healthcare provider's advice to make dietary or lifestyle changes. These may include losing weight, eliminating spicy foods or caffeine, quitting smoking, and reducing or eliminating alcohol intake. Patients should always tell their doctor about other medications, over-the-counter supplements or any other therapies they are taking.

Patients with Barrett's esophagus are typically put on a surveillance program to monitor the condition closely. Regular endoscopy procedures may be required to make sure the patient's condition is being controlled. Random or directed biopsies of the mucosa are evaluated by the gastrointestinal pathologist to exclude the presence of dysplasia or cancer.

## Learn more!

These resources provide more information about Barrett's esophagus.

<http://digestive.niddk.nih.gov/ddiseases/pubs/barretts>

<http://www.webmd.com/heartburn-gerd/guide/barretts-esophagus-symptoms-causes-and-treatments>

<http://patients.gi.org/topics/barretts-esophagus/>

[www.gastro.org](http://www.gastro.org)

<http://www.iffgd.org>

This material is intended for patient education and information only. It does not constitute advice, nor should it be taken to suggest or replace professional medical care from your physician. Your treatment options may vary, depending upon medical history and current condition. Only your physician and you can determine your best option.

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