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Commentary

An Overview of Barrett's oesophagus

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INTRODUCTION

Barrett's oesophagus is defined is the damage cause by acid reflux in the thin pink lining of the swallowing tube which connects from mouth to stomach that is oesophagus. This barrett's oesophagus cause oesophageal cancer which is the main and serious complication. Regular examination of the oesophagus should be done to know priorly any cancerous tissue present in the oesophagus. The main symptoms of this barrett's oesophagus includes heart burn, regurgitation of food and chest pain which occurs rarely. Barrett's oesophagus can be detected or diagnosed by performing the endoscopy test and the endoscopy procedure consists of a long nasogastric tube in which one end is fitted with the camera and is sent inside the throat to check the colour of the oesophagus. If the colour of the oesophagus is in pale and glossy in appearance it has been in the normal state and if the colour changes from the pale colour to red colour then it is detected as barrett's oesophagus. When the oesophagus changes the colour to red then further diagnosis should be made by doing biopsy of the tissue. The seriousness of the barrett's oesophagus can be detected by the degree of change in the tissue. Barrett's oesophagus occurs when there is a family history of the disease. This barrett's oesophagus disease occurs mostly in males and people with the age more than 50 years especially the whites get more easily. This barrett's oesophagus mostly occurs in people suffering with GERD gastroesophageal reflux disease and also with the people who are suffering with heart burn. Barrett's oesophagus occurs mostly in smoking individuals then the non- smokers. Treatment of barrett's oesophagus can be done or by depending upon the degree of the tissue change and depending upon

the severity of the symptoms present. If you have GERD then the medication prescribed are antacids, h2 receptor blockers, proton pump inhibitors and baclofen. By using this medication there would be a decrease in stomach acid reflux and protect the oesophagus. If there is a high grade of tissue damage in the oesophagus then a surgery is performed in which the surgery includes the removal of the damaged tissue or damaged part of the oesophagus. Obesity is also one of the risk factor for this barrett's oesophagus. Management of barrett's oesophagus can be done by avoiding the intake of alcohol or by gradual decrease in the intake is one of the effective management of barrett's oesophagus and also to maintain a healthy diet and perfect weight and to reduce the fat content food especially in obese people. Major complications of Barrett's oesophagus precancerous changes. Management of barrett's oesophagus can be done through the diet by consuming more amount of fiber intake in daily diet which lower the risk of developing the cancer. Permanent cure for barrett's oesophagus cannot be done it can only be minimised by the use of medication and by the reducing the acid backflow into the oesophagus. Proton pump inhibitors are the most effective drug in the treatment of barrett's oesophagus.

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CONFLICT OF INTEREST

The authors report no conflict of interest.

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