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Healing HALO: New technique relieves Barrett's esophagus

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MELANIE TUCKER

For years, Tim Chaney had treated his heartburn with some Alka-Seltzer tablets and other over-the-counter antacids.

It's just heartburn, after all.

But when Chaney ended up in the doctor's office at the urging of his concerned wife, what he thought was only heartburn turned out to be the precursor to esophageal cancer, called esophageal adenocarcinoma.

Chaney, 49, was diagnosed with Barrett's esophagus eight years ago, a precancerous condition that affects the lining of the esophagus, the muscular tube that carries food, liquid and saliva from the mouth to the stomach. When chronic gastric reflux -- what we commonly refer to as heartburn -- occurs and exposes the lining of the esophagus to acid over a period of time, the lining can be injured and break down.

A surprise diagnosis

"I was surprised," Chaney admitted, upon hearing the news. "Anything to do with the esophagus and how it can be damaged wasn't on my radar screen."

Half of U.S. adults experience symptoms of gastroesophageal reflux disease (GERD) almost monthly while 20 percent experience symptoms weekly. Barrett's is estimated to affect about 3.3 million adults. Each year, 86,000 new cases are diagnosed. Diagnosis involves having an endoscopy done that allows for inspection and tissue sampling of the esophagus.

Chaney is a patient of gastroenterologist Dr. Gene Overholt, of GI Associates in Knoxville. Overholt said it probably takes years before GERD develops into Barrett's, and men are diagnosed with Barrett's at a rate four times higher than women.

Barrett's is almost always associated with a hiatal hernia, the doctor said. Things that can make Barrett's worse are obesity, tobacco use and eating dark chocolate.

But what foods actually upset a person's stomach can differ from person to person. For Chaney, it's onions. He hasn't eaten them in years. For others, it might be spicy foods or coffee, Overholt said. Each person must use individual diet common sense.

Early diagnosis is key, Overholt said. Chaney's Barrett's was monitored for years before he got the opportunity to participate in a clinical trial with a new treatment option. His Barrett's had actually developed into the most dangerous level for the disease -- the next level would have been cancer.

Technology to the rescue

BARRX Medical Inc. developed the **HALO³⁶⁰ System** of treating Barrett's. As Overholt explained, it uses a radio frequency current to remove the damaged Barrett's cells in the lining of the esophagus, while a patient is sedated. With the removal of the damaged tissue, new, healthy tissue regenerates itself, Overholt explained.

The device is inserted into the esophagus and then inflated. The coils in the instrument come in contact with the lining of the esophagus, and the thermal energy creates a heat injury that destroys Barrett's. Healthy tissue is not affected.

The treatment itself takes about 2 seconds, Overholt said. A patient is normally in and out of the office quickly and back to work in 24 or 48 hours.

Chaney had the procedure in 2004. He said there was minor discomfort afterward. "It felt like pressure," he said. "It was very tolerable considering the benefit from it."

After his initial treatment, Chaney went back for a follow-up where Overholt found a couple of spots and treated them. Since then his esophagus has been free of Barrett's.

"He was facing an esophagectomy," Overholt said. Chaney would have needed to have his esophagus removed had the Barrett's not been stopped in its tracks.

The use of thermal ablation to treat various conditions is common, Overholt explained. It is used on the brain, uterus, kidney and skin. "How it is delivered is the critical component," he said.

The HALO³⁶⁰ has been approved by the Food and Drug Administration and has several data to back its success.

Chaney is not alone in the way he dealt with his heartburn initially -- talking over-the-counter antacids. Unfortunately this way of treatment will not prevent Barrett's.

"If you have reflux and heartburn and it is diagnosed properly -- and that is a key point -- you will not get Barrett's," Overholt said. "If you have heartburn and you intermittently treat it with things over the counter you are at risk for developing Barrett's because the treatment will be incomplete."

Overholt said there really is no reason for people who frequently suffer from heartburn not to have an endoscopy. While white men over 50 suffer more frequently with Barrett's than any other population, he has treated men and women in their 20s.

GI Associates of Knoxville, Overholt said, is the only group in this area that is treating Barrett's with the new HALO³⁶⁰ system. He said it generally takes 10 years from the time something is introduced for it to become general practice. But the Internet is changing all that, he added. ``Patients are seeing things on the Internet and they demand it."

Chaney will continue to have his condition monitored. He said he recently talked with a friend who was having heartburn issues.

``I told him to get checked," Chaney said.

That's the message that needs to get out, Overholt added.