

Barrett's Oesophagus – Richard's Story



Name: Richard Age: 55

Diagnosis: Barrett's Oesophagus

Link to HCUK: When Richard found out about HCUK and our work to raise awareness of the symptoms of Barrett's Oesophagus he was very keen to share his experience, in the hope that it would highlight the benefit of listening to your symptoms and seeking medical advice

Richard (who has asked to remain anonymous) had experienced deteriorating heartburn symptoms for over 15 years. He was serving in the Army at the time & was self-medicating with Rennie in ever increasing amounts. He recalled a time when he had to report in sick on one Army exercise, which was very much out of character. Richard jokes that that high calorie army ration packs are good at aggravating GORD (Gastro-Oesophageal Reflux Disease) although at the time, of course, he didn't know this. Other things that made his symptoms worse were spicy food, a high fat diet, lying down, alcohol and jumping around.

As Richard's condition deteriorated, his symptoms became more intrusive; he generally felt uncomfortable & swallowing became more difficult. He found he would unconsciously sharply draw in his breath to cool his throat which was sometimes misconstrued as disapproval of the actions of those around him and harmed his relationships. As his peristalsis (involuntary constriction and relaxation of the gastro-intestinal tract) worsened he became unable to eat without the aid of large amounts of fluid to force the food down his restricted oesophagus. There were occasions in restaurants where he would become agitated if the waiter didn't bring the water that he had ordered and sometimes he even had to resort to taking drinks off other tables, from strangers, to clear his throat. He recalls that he would disappear into the nearest toilet to avoid choking in public thus removing himself from the people that could potentially save his life. Once, as the host of an important lunch in the Officers Mess he had to leave the table unexcused, retreat to the washroom where he failed to clear the blockage in his throat and had to commandeer a driver to urgently take him to hospital. However, thankfully, the obstruction cleared on the way. Richard comments that he probably wasn't the best dinner guest.

Then, whilst in a high-pressure job in the MOD, Richard experienced a very sharp pain in his chest and feared he was having a heart attack. He immediately visited Accident and Emergency where test results showed his suspected heart attack was in fact heartburn. Richard was astonished to say the least.

Following this diagnosis Richard went on to experiment with some GORD drugs which were not successful. He then endured an abortive gastroscopy which incorrectly diagnosed that he had a hiatus hernia. Subsequently, Richard received treatment from Dr Terry Wong, a Consultant Physician and Gastroenterologist at London Bridge Hospital, who was superb. His treatment included a well sedated gastroscopy which identified that he had very serious GORD and his oesophagus was now angrily raw and in danger of rupture during peristalsis. Over time, Richard became more heavily medicated and a procedure called Nissen Fundoplication was performed. This is an operation where the top part of the stomach is wrapped around the lower part of the oesophagus to strengthen the valve. At the time of the operation Richard was diagnosed with Barrett's Oesophagus and received bi-annual gastroscopies for surveillance.

Following the great news that Richard is now clear of the condition he has been discharged from surveillance and has been prescribed PPIs to prevent recurrence. As he recalled his story to us, Richard described the moment he unpacked his kit-bag at the end of his military career and his surprise at the volume of the bag that was dedicated to boxes of Rennie. When he had such a small amount of space for personal belongings the thing that he chose to squeeze in was an extra box of Rennie. A powerful reminder of the importance of seeking medical advice rather than self-medicating.

Richard would like to share what his experience has taught him:

1. Listen to your symptoms and see a doctor.
2. Take note of the symptoms of those around you.
3. Tolerate people that are ill.
4. If necessary, find an EXPERT. A consultant.
5. Apologise if you steal someone else's drink!