

IMPACT OF PERCUTANEOUS ENDOSCOPIC GASTROSTOMY (PEG) ON THE EVOLUTION OF THE DISEASE IN PATIENTS WITH AMYOTROPHIC LATERAL SCLEROSIS (ALS)

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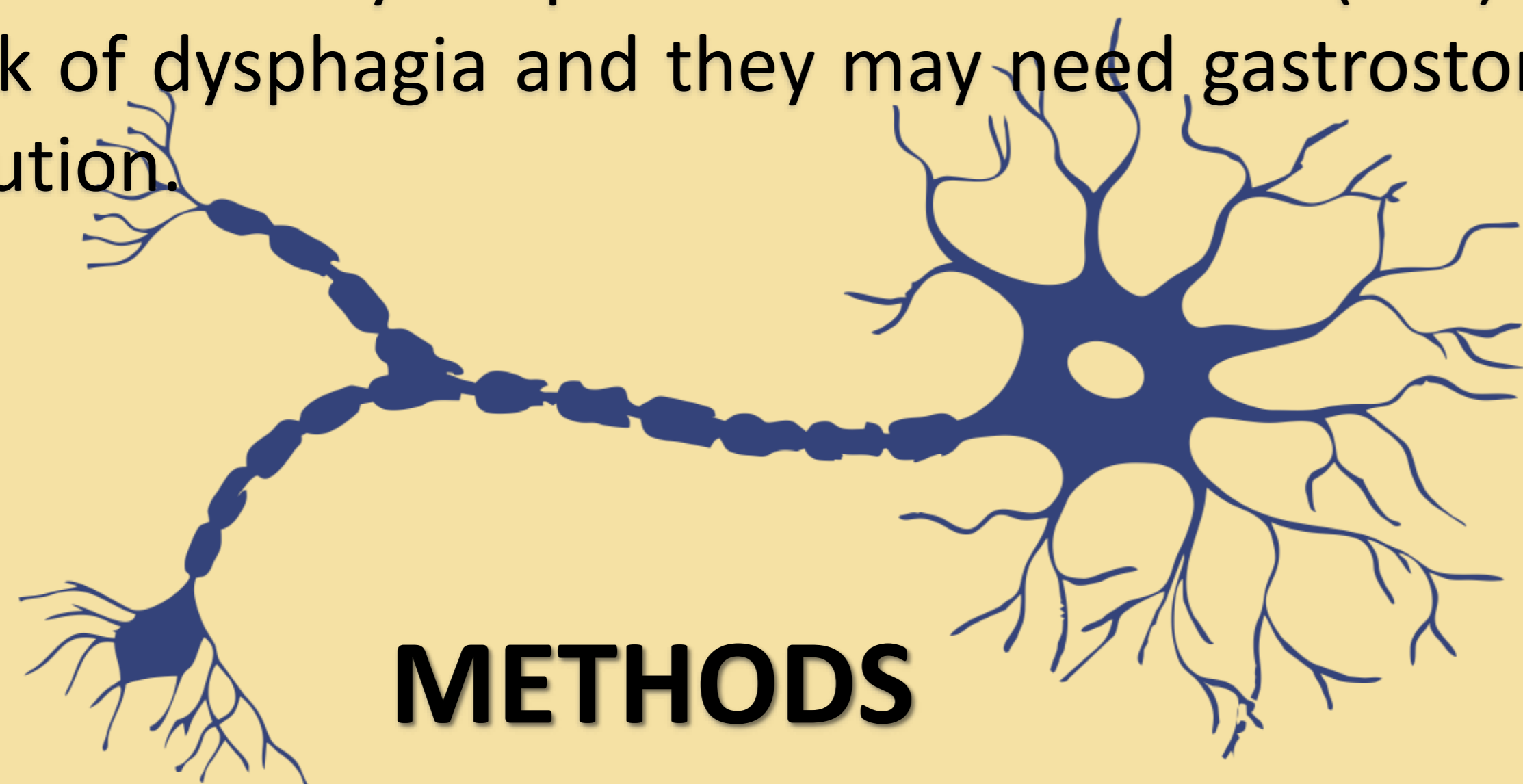
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RATIONALE

Patients with Amyotrophic Lateral Sclerosis (ALS) have high risk of dysphagia and they may need gastrostomy in its evolution.

The aims of this study were:

- To describe anthropometry at the beginning of the nutritional follow-up in patients with ALS.
- To know the rate of complications between patients with and without PEG and the influence of the moment of implantation on them.
- To evaluate survival based on the implantation of PEG.



METHODS

An interhospital registry was created for the eleven hospitals of Castilla y León through a website. They were evaluated on data on disease evolution, nutritional history and subjective global assessment (VGS) were evaluated in all patients. We compared the data of those in which PEG was implanted and those that did not and between those in which PEG was implanted before (less than 10 months after diagnosis) with respect to those that were implanted later. This project was funded by one grant from "Gerencia Regional de Salud" of Castilla y León, Spain (SACYL) and another grant from SCLEDyN.

RESULTS

	PEG	NO PEG
SEX (%M/%F)	52.6/47.4	61.7/38.3
Age (years)	63.68 (13.33)	65.23 (8.29)
BMI (kg/m ²)	22.06	24.59
% Loss Weight	13.91	7.33
Time to dysphagia (months)*	3.47 (15.82)	10.75 (46.8)
Type of ALS (Bulbar/Spinal)*	45.5%/30.6%	54.5%/69.4%

Table 1: Differences in variables between patients who need PEG and those who not. M: Male; F: Female. * p<0,05

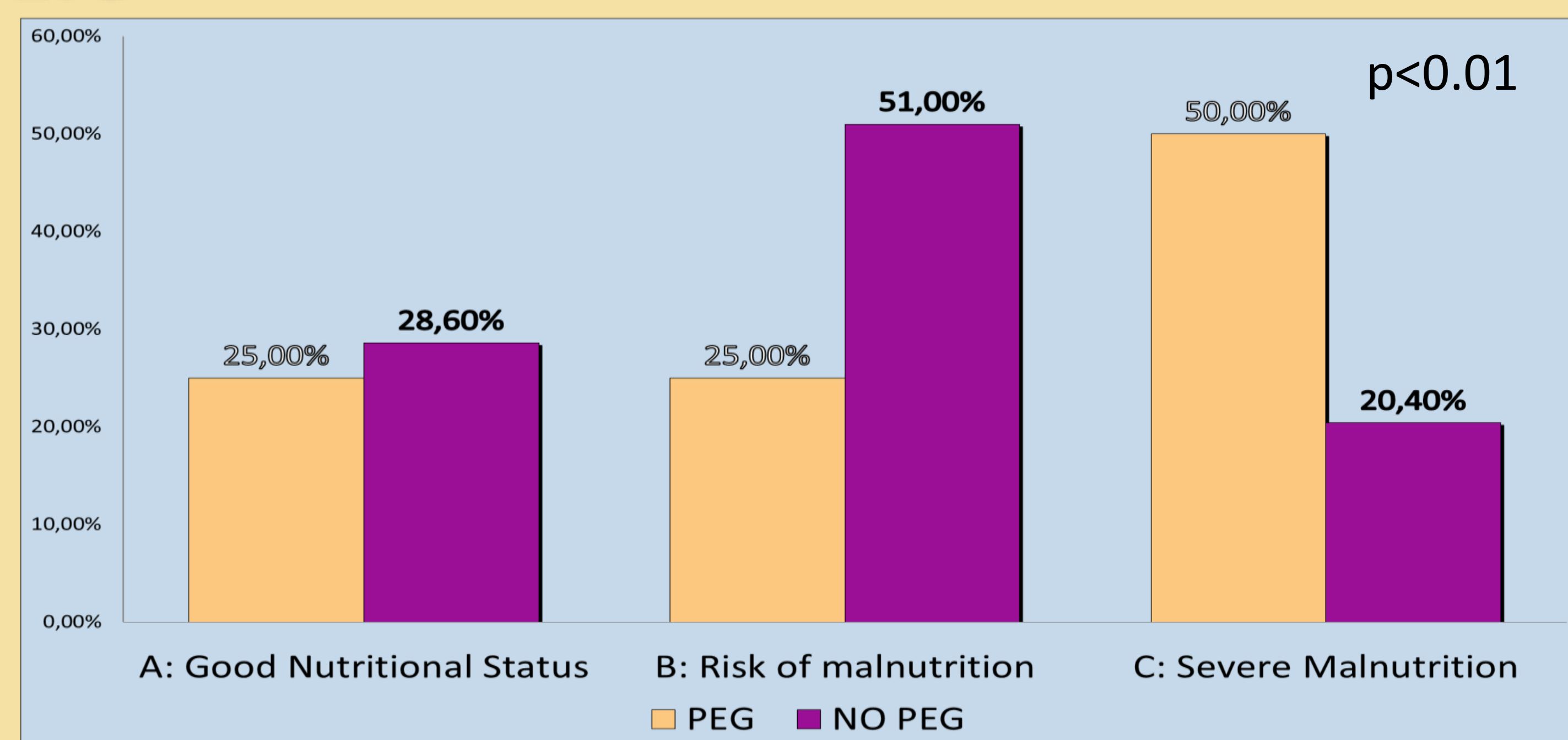


Figure 1: Differences in nutritional assessment at onset of nutritional support (SGA: Subjective Global Assessment) between patients who need PEG and those who not.

A total of 93 patients from 6 hospitals in Castilla y León were analyzed. In 38 patients (38.8%), PEG was implanted (table 1). The nutritional assessment at the start according to VGS showed that patients with PEG has worse nutritional status (figure 1). Those in which PEG was implanted had a higher rate of hospital admissions (26.3% vs. 8.3%, p <0.01) (figure 2). In those who were implanted earlier, they had less income associated with complications of this (figure 2). Among the deceased patients 38 (40.4%) those who had PEG implanted (20 patients (52.6%)) had a longer survival time (30.21 (5.15) months vs. 15.31 (3.47) months, p = 0.01) (figure 3).

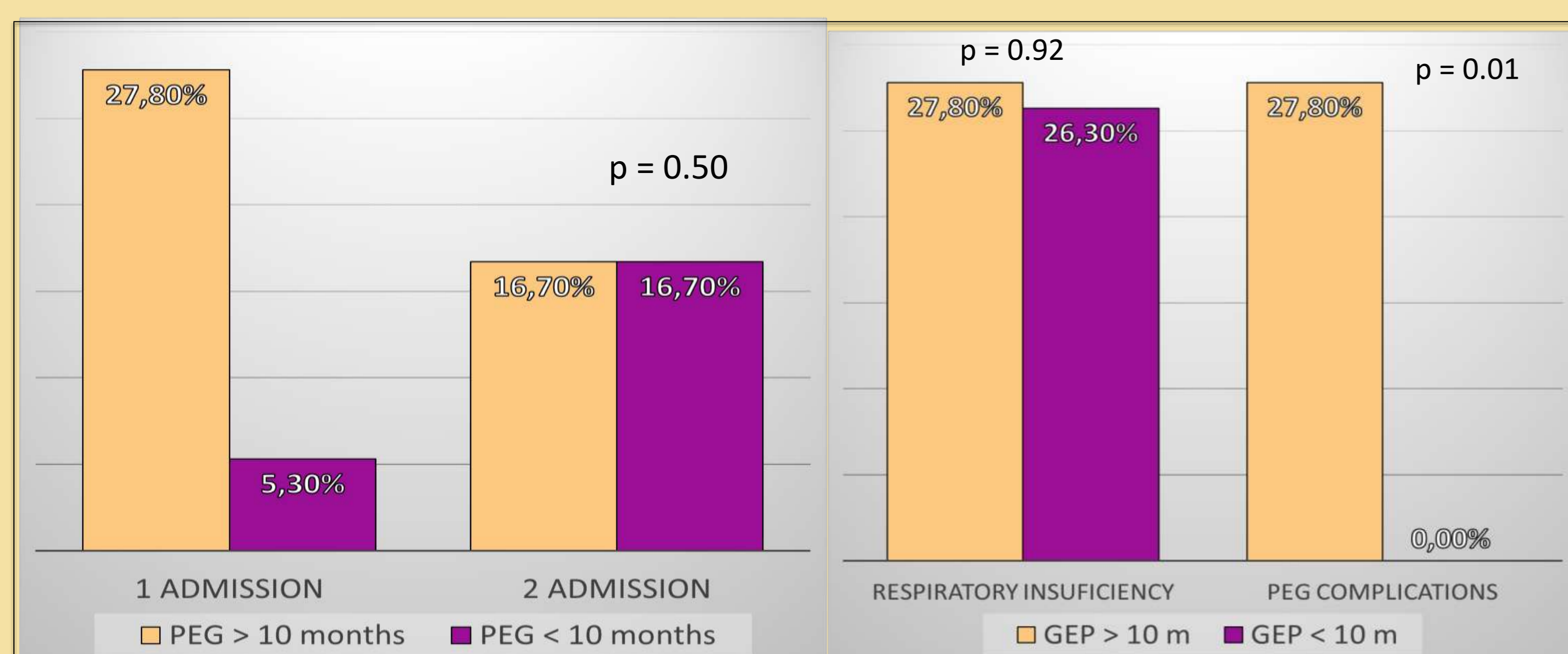


Figure 2: Frequency of complications related with ALS in patients with or without PEG

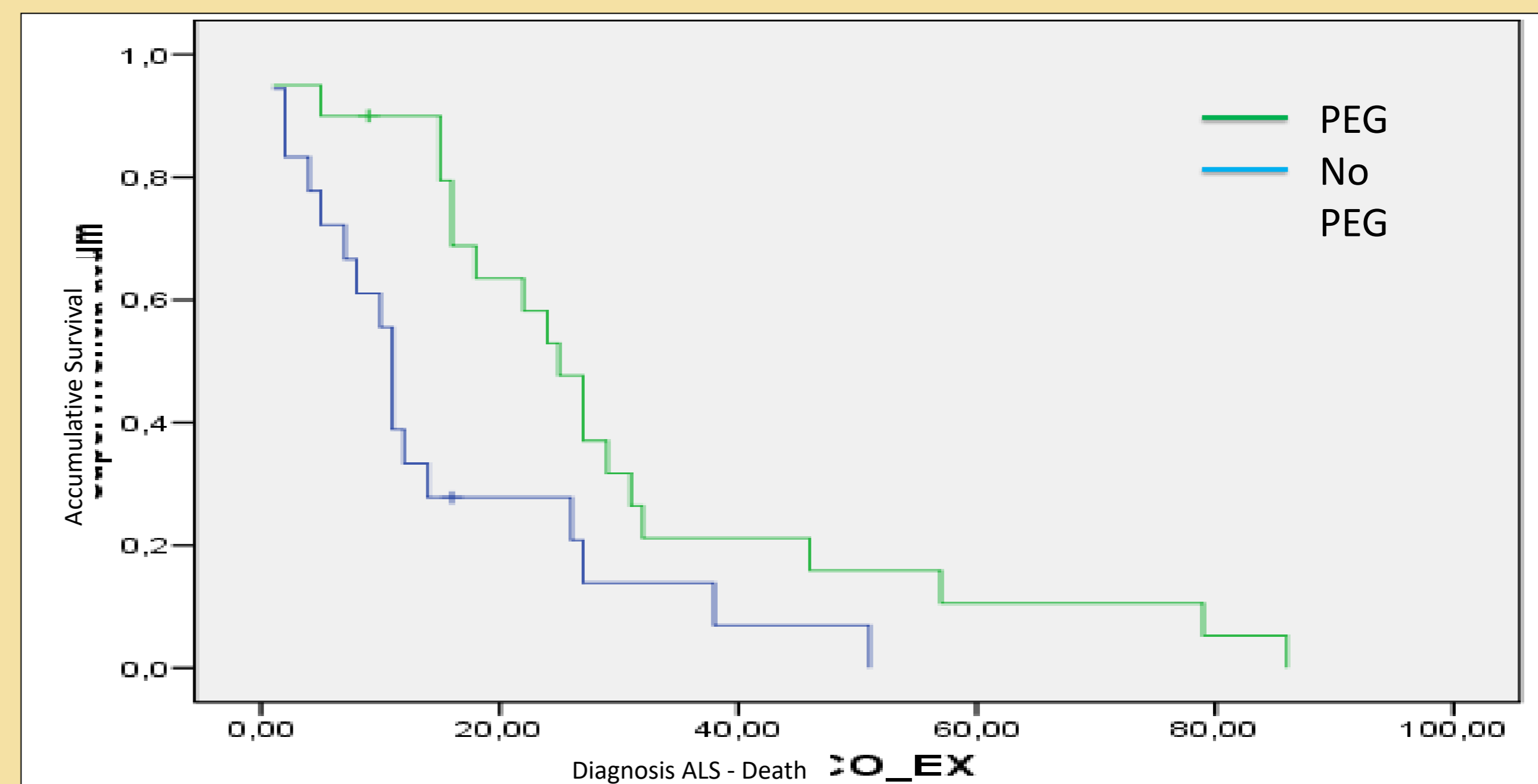


Figure 3: Differences in survival (Kaplan-Meier curves) between patients with or without PEG

CONCLUSIONS

- Patients with ALS and PEG present a worse nutritional situation at onset.
- PEG implanted early produced a reduction in income associated with complications derived from it.
- PEG could show a survival benefit among patients with ALS.