



Date: 19/05/2023

Deputy Louise O'Reilly TD
Dáil Éireann
Leinster House
Dublin 2

PQ No. 20634/23

To ask the Minister for Health if a gastroparesis specialist will be immediately recruited to the HSE; and if in the meantime, patients who need treatment from a gastroparesis specialist will be referred to a specialist outside the State.

Dear Deputy O'Reilly,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

Response

Gastroparesis may be defined as a delay in the gastric emptying of solid foods in the absence of mechanic obstruction of the stomach, and recognized as part of a broader spectrum of gastric neuromuscular dysfunction. Symptoms include but are not limited to early satiety, postprandial fullness, nausea, vomiting, belching, bloating and abdominal pain.

In 2021, the United European Gastroenterology and European Society for Neurogastroenterology and Motility published consensus guidelines on the management of gastroparesis. It was found that although no population-based studies have addressed the prevalence of gastroparesis, analyses of diagnostic records and procedures suggest a low prevalence. Data from the UK Clinical Practice Research Datalink database advised a standardised incidence of 1.9 per 100,000 persons in 2016, with female predominance. Central to the diagnosis of gastroparesis is upper gastrointestinal endoscopy and a gastric emptying study. Food retention in the stomach despite adhering to fasting recommendations is a probable sign.

Gastroparesis is managed by all Consultant Gastroenterologists in line with the aforementioned international guidelines, a range of approaches may be adopted including:

Dietary management

In relation to the management of gastroparesis, input from a dietitian may decrease the risk of calorie deficiencies.



Medication management

A range of medication is available for this condition however studies are ongoing to determine their effectiveness.

Endoscopic and surgical management

Surgical procedures are available in Ireland albeit further studies are required to understand the impact on this condition.

Complimentary therapies

A variety of herbal therapies have been utilized in the management of functional dyspepsia, peppermint oil with or without caraway oil, ginger, Iberogast (a herbal liquid), Rikkunshito (a Japanese herbal medicine) and artichoke extract, but there is a lack of data in relation to gastroparesis.

To conclude, there is no plan currently to recruit a gastroparesis specialist within the HSE as patients living with gastroparesis are managed by all Consultant Gastroenterologists. Patients requiring advanced levels of care need to be assessed on a case-by-case basis as from the above information, proven therapies are lacking worldwide. And the National Clinical Programme for Gastroenterology and Hepatology continue to advocate for additional resources to improve patient care.

I trust this answers your question to your satisfaction.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'Emma Benton'.

Emma Benton

General Manager

Acute Operations