2024 update to SAGES guidelines for the use of peroral endoscopic myotomy (POEM) in the treatment of achalasia.

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Society of American Gastrointestinal and Endoscopic Surgeons (SAGES)

Calabrese EC, Kindel T, Slater BJ, et al. 2024 update to SAGES guidelines for the use of peroral endoscopic myotomy (POEM) in the treatment of achalasia. [internet]. Los Angeles (CA): Society of American Gastrointestinal and Endoscopic Surgeons (SAGES); 2025 Feb. [26 references]

View Original Guideline

Overview

Guideline Objective

To provide evidence-based, updated recommendations regarding the utility of peroral endoscopic myotomy (POEM) in the management of esophageal achalasia in adults

Patient Population

Adults with achalasia

Note: This update incorporates new data relating to adults. Recommendations for the pediatric population are unchanged as no new comparative data has been identified since the 2021 previous guideline.

Recommendations

Recommendation Statements

Key Question 1: Should peroral endoscopic myotomy (POEM) with judicious use of proton-pump inhibitor (PPI) versus Heller myotomy (HM) with fundoplication be used for achalasia in adults?

- The guideline panel suggests that adult patients with type I and II achalasia may be treated with either POEM with appropriate use of PPI or laparoscopic Heller myotomy with fundoplication based on surgeon and patient shared decision-making. (**Conditional recommendation; Low certainty of evidence**)
- The panel suggests POEM over laparoscopic Heller myotomy for type III adult achalasia. (**Expert opinion**)
- The panel suggests consideration of routine upper endoscopy in both groups to detect the possibility of the asymptomatic patient with significant reflux who could be at risk of adenocarcinoma. The panel also notes an absence of data on this topic and emphasizes the importance of further research to determine exact timing and protocols. The symptomatic patient should undergo appropriate work-up for objective diagnosis of gastroesophageal reflux disease (GERD) before treatment. (**Expert opinion**)

Key Question 2: Should POEM vs. pneumatic dilatation (PD) be used for achalasia in adults?

- The guideline panel suggests POEM over PD. (**Conditional recommendation; Moderate certainty of evidence**)

Evidence Rating Scheme

Methods outlined in the Grading of Recommendations Assessment, Development and Evaluation (GRADE) handbook were used to judge the certainty of evidence.

Scheme not provided.

Recommendation Rating Scheme

Interpretation of Strong and Conditional Recommendations

All guideline recommendations were assigned either a "**strong**" or "**conditional**" recommendation. The words "the guideline panel recommends" are used for strong recommendations, and "the guideline panel suggests" for conditional recommendations, as per the GRADE approach. A conditional recommendation signals that the benefits of adhering to a recommendation probably outweigh the harms although it does also indicate uncertainty. This uncertainty may be due to a lack of high-quality evidence or variability in how individual patients value the outcomes of interest.

Related Content

Supporting Documents

- The Original Guideline is also available from the *Surgical Endoscopy Journal*; 2025 Jul.
- Appendix A: Literature Search Strategies.
- Appendix B: PRISMA Flow Diagram.
- Appendix C: Evidence Tables.
- Appendix D: Forest Plots.
- Appendix E: Evidence to Decision (EtD) Tables.
- SAGES Guidelines Development: Clinical Practice Guideline Update Standard Operating Procedure; 2024 Oct.
    - SAGES Guidelines Development: Health Equity Update to Standard Operating Procedure; 2023 Oct.
    - SAGES Guidelines Development: Patient Engagement Update to Standard Operating Procedure; 2024 Oct.

Implementation Tools

No implementation tools available.

Patient Education

No patient education materials available.

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TRUST Scorecard

Composition of Guideline Development Group (GDG)

Multidisciplinary GDG Members	**Yes**
Methodologist Involvement	**Yes**
Incorporation of Patient and Public Perspective	★★★★★

Systematic Review of Evidence

Literature Search	★★★★★
Study Selection	★★★★☆
Evidence Synthesis	★★★★☆

Foundations for Recommendations

Strength of Evidence Grade	★★★☆☆
Description of Benefits and Harms of Recommendations	★★★★★
Summary of Evidence Supporting Recommendations	★★★☆☆
Strength of Recommendations Rating	★★★☆☆
Clear Articulation of Recommendations	★★★★★

Funding Source	**Yes**
Disclosure and Management of Financial Conflicts of Interests	★★★★★
External Review	★★★☆☆
Updating	★★★★☆

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