

**Gastroparesis and Dysmotilities
Association
GPDA**

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Press Release

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President/Founder**

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Gastroparesis and Dysmotilities Association (GPDA) is a newly formed non-profit organization. It has been established to raise public awareness, support research, and get medical information out to those who suffer with gastrointestinal motility disorders. GPDA's President/Founder, Jeanne Keith-Ferris, recently spoke at the 12th Biennial American Motility Society Meeting in Galveston, Texas.

Gastrointestinal motility disorders are devastating diseases. They can occur along any or all segments of the GI tract. Each region has its own diagnostic name. When this disorder primarily affects the stomach, it is called gastroparesis.

Gastroparesis literally means a weakened stomach. It is also called delayed gastric emptying. Food can sit undigested in the stomach for many hours. In severe cases, the stomach is paralyzed, in which occurrence the individual needs to be fed a totally liquid diet via tubes that are surgically placed to bypass the stomach. Without this intervention, the sufferer would starve to death. Dehydration due to unrelenting vomiting is an ever-present risk for those from the severe form of the disease. In all cases, the individual's quality of life is ruined; even the simple pleasure of eating is replaced by anxiety since food triggers intense symptoms of abdominal pain, bloating, nausea, belching, and heartburn.

Children also suffer with gastroparesis. The puzzling thing about this motility disorder is that no known cause can be found for 30 to 40% of those who develop it. Some known causes include but are not limited to Type I diabetes, Parkinson's disease, some types of stomach surgery, and scleroderma.

Gastroparesis is a severe neuromuscular disorder. Yet, at present, the only medications for treating this disabling disorder are borrowed from other uses. Most of these drugs have been around for several decades.

Some novel treatment approaches have been devised to help manage the crippling nausea and vomiting. One such treatment is a device similar to the heart pacemaker. This small, implantable device delivers low-voltage electrical stimulation to the stomach wall, which helps control the daily nausea and vomiting of the severe gastroparetic patients. This aired as a news item on CBC (Canadian Broadcasting Corporation) radio, The Home Stretch with Jeff Collins, Calgary, AB. This was an interview with Dr. Martin Mintchev, Department of Electrical and Computer Engineering, University of Calgary. Dr. Mintchev is extending this research to use microprocessor-controlled electrical stimulation to produce artificial peristalsis in the gut.

More and more gastroenterologists (GI doctors) are using Botox injections into the pylorus (the valve between the stomach and small intestine) to aid emptying of the stomach. Research into this treatment is taking place at a variety of health centres.

Basic research is also looking at a unique set of specialized cells found nowhere else except in the gut and that are believed to be responsible of peristalsis. These cells are called interstitial cells of Cajal. Jan Huizinga, Ph.D. at McMaster University in Hamilton, Ontario is one researcher who has devoted his career to studying the physiology of these cells. He is an internationally recognized researcher who has received prestigious awards.

The Gastroparesis and Dysmotilities Association is striving to organize the first scientific symposium on gastroparesis. It is our hope that by focusing medical expertise on this disorder, answers can be found for a cure.