

**ABSTRACT SUBMISSION**

Title: Salivary pepsin assay as a diagnostic test for laryngopharyngeal reflux

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| <b>Abstract No.</b>      | 0216  |
| <b>Categories</b>        | Laryngology   |
| <b>Presentation</b>      | Both oral and poster presentation   |
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| <b>Abstract USB</b>      | Confirm   |
| <b>Prior publication</b> | No  |
| <b>Title</b>             | Salivary pepsin assay as a diagnostic test for laryngopharyngeal reflux   |
| <b>Objectives</b>        | A growing body of evidence indicates that activated pepsin is a major aetiological factor in laryngopharyngeal reflux (LPR). Upper aerodigestive tract symptoms are common, and it is important to clarify their cause, in order that optimal therapy can be offered. The aim of this study was to identify the value of salivary pepsin assay as a diagnostic test for LPR.  |
| <b>Method</b>            | One hundred consecutive patients, presenting with upper aerodigestive tract symptoms and a Reflux Symptom Index >10 were recruited. Each patient provided three salivary samples at specific time points and these were sent for Peptest analysis. Salivary pepsin assay results were released after all patients had a clinical diagnosis, and were analysed and correlated with clinical findings, by an independent clinician. |
| <b>Results</b>           | To identify the value of salivary pepsin assay in diagnosing LPR, patients were split into two diagnostic categories: laryngopharyngeal reflux (n=78; 81% Peptest positive) and other diagnosis (n=22; 0% Peptest positive). In this study, salivary pepsin assay gave 81% sensitivity and 100% specificity in diagnosing LPR. Positive predictive value of the test was 100% and negative predictive value was 60%.              |
| <b>Conclusions</b>       | This study demonstrates that salivary pepsin assay has an excellent specificity and positive predictive value in diagnosing laryngopharyngeal reflux. Sensitivity and negative predictive value are lower, implying that  |

whilst positive salivary pepsin assay is an excellent diagnostic tool for laryngopharyngeal reflux, a negative test does not necessarily rule out the diagnosis. This is a promising move towards future research into identifying targeted therapies for laryngopharyngeal reflux.