

AGIP Statement on EndoFLIP

FLIP Panometry (EndoFLIP) is an emerging technology that is gradually being introduced into hospitals across the UK. The Association of Gastrointestinal Physiology (AGIP) believes that GI Physiology departments should play a central role in its development, oversight, interpretation, and reporting.

FLIP measures the distension-induced contractile response, secondary peristalsis, and opening dynamics of the oesophageal body and lower oesophageal sphincter in a sedated patient. This differs from high resolution manometry (HRM), which evaluates primary, swallow-induced peristalsis in a non-sedated, compliant patient. These techniques are not mutually exclusive or interchangeable; rather, they are complementary, offering additional insights into oesophageal dynamics, function, and dysfunction.

Interpretation of FLIP panometry should always be made in the context of the clinical presentation, endoscopic findings, and other complementary investigations (e.g., HRM, timed barium oesophagram). As FLIP continues to evolve, AGIP recommends that GI Physiology units remain integral to its ongoing development, clinical application, and interpretation.

[AGIP Committee, Dec 2025. Review Date: Dec 2027]