

DESCRIPTION

A condition that occurs when acids from the stomach move backward (reflux) into the esophagus.

FREQUENT SIGNS AND SYMPTOMS

- Persistent heartburn (stomach acid touches the lining of the esophagus and causes a burning sensation in the chest), also known as Gastro-Esophageal Reflux Disease. You can have GERD without having heartburn.
- Regurgitation (acid can be tasted in the back of the mouth).
- Hoarseness in the morning.
- Difficulty swallowing or feeling like you have food stuck in your throat, like you are choking, or your throat is tight.
- Excessive clearing of the throat, dry cough and bad breath.
- Burning in the mouth.
- Infants and children may have repeated vomiting, coughing, and other respiratory (lung) problems. Most babies grow out of GERD by their first birthday.

CAUSES

The problem occurs when the lower esophageal sphincter (LES) does not close properly. This allows stomach contents to leak back, or reflux, into the esophagus. The LES is a ring of muscle at the bottom of the esophagus.

RISK INCREASES WITH

- Alcohol use.
- Overweight.
- Pregnancy.
- Smoking.
- Certain Medications, particularly sedatives.
- Hiatal hernia may contribute.
- Certain foods can trigger symptoms (chocolate, caffeine, fatty and fried foods, garlic, onions, mint, spicy foods, spaghetti, chili, pizza, tomato products and citrus fruits).

EXPECTED OUTCOMES

Symptoms can be improved with treatment. GERD may come and go for weeks or months. Follow-up with your internal medicine doctor or a GI specialist if symptoms persist.

POSSIBLE COMPLICATIONS

- Inflammation of the esophagus (esophagitis).
- Ulcers.
- Scars from tissue damage narrow the esophagus.
- Barrett's esophagus (disorder that can lead to cancer).
- Erosion or weakening of the teeth.
- Asthma, chronic cough, and pulmonary fibrosis may be aggravated or even caused by GERD.

GENERAL MEASURES

- If you smoke, stop. Find a plan that works for you.
- If you are overweight: Losing even a small amount of weight may help decrease your symptoms.
- Eat smaller, more frequent meals.
- Keep a diary to help identify possible food triggers.
- Avoid wearing tight fitting clothing around the waist.
- Avoid lying down for 2-3 hours after a meal.
- Raise the head of your bed 6 to 8 inches by putting blocks of wood under the bedposts.

MEDICATIONS

There are many medications available to aid in the treatment of GERD. Nonprescription antacids; medications that decrease acid production; medications that protect the stomach lining or medications that help the muscles that empty your stomach. Used alone or in combination, these medications may help control symptoms. Your health care provider will help you decide which ones will work best for you.

SEEK MEDICAL ATTENTION IF

- You develop chest pain, or pain in the neck or shoulder.
- Your stools become bloody, dark or tarry.
- You vomit blood, bile or a "coffee ground" material.
- You become short of breath, dizzy or light headed.
- Your pain becomes worse or more frequent.