

# Gastroesophageal Reflux Disease (GERD)

Gastroesophageal reflux disease (GERD) is a condition in which food or liquid travels from the stomach back up into the esophagus (the tube from the mouth to the stomach). This partially digested material is usually acidic, and can irritate the esophagus, often causing heartburn and other symptoms. GERD usually occurs because the lower esophageal sphincter (LES) - the muscular valve where the esophagus joins the stomach - does not close properly. Someone who experiences recurring, significant heartburn two or more times a week may have GERD

## Causes

It may include:

- alcohol use
- pregnancy
- obesity
- smoking

Also, certain foods sometimes are linked to acid reflux, including:

- citrus fruits
- mint flavorings
- chocolate
- spicy foods
- drinks with caffeine
- fatty and fried foods
- garlic and onions
- tomato-based foods, like spaghetti sauce, chili, and pizza

## Symptoms

- Heartburn
  - ♦ Involves a burning pain in the chest (under the breastbone)
  - ♦ Increased by bending, stooping, lying down, or eating
  - ♦ Relieved by antacids
  - ♦ More frequent or worse at night
- Belching
- Regurgitation of food
- Nausea and vomiting
- Vomiting blood
- Hoarseness or change in voice
- Sore throat
- Difficulty swallowing
- Cough or wheezing

## Diagnosis

An upper endoscopy is one of the best ways to look for inflammation and damage to the esophagus and stomach. For this test, the doctor first gives you medicine to make you feel sleepy and less anxious, then sprays your throat to numb it and slides a thin, flexible plastic tube called an endoscope down into the esophagus and the stomach. A tiny camera in the endoscope lets the doctor look for abnormalities on the surface of the esophagus and stomach lining. During the endoscopy, the doctor also may use small tweezers (forceps) to remove a piece of tissue for biopsy. A biopsy can reveal damage caused by acid reflux or infection and help rule out other problems.

In another kind of test, called an ambulatory pH monitoring exam, the doctor puts a tiny tube into the esophagus that will stay there for 24 hours. While you go about your normal activities, it measures when acid comes up into your esophagus and how much acid refluxes. This test is useful in teens with GERD symptoms but no esophageal damage. It also can detect whether the reflux triggers respiratory symptoms, such as wheezing and coughing

## Treatment

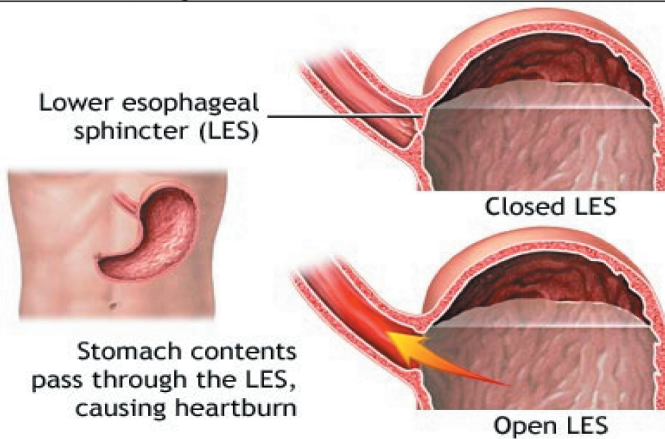
Your doctor can tell you about diet changes and medicines to help with GERD.

General measures include:

- Weight reduction
- Avoiding lying down after meals
- Sleeping with the head of the bed elevated
- Taking medication with plenty of water
- Avoiding dietary fat, chocolate, caffeine, peppermint (they may cause lower esophageal pressure)
- Avoiding alcohol and tobacco

A doctor may give you a prescription for other

## Gastroesophageal reflux disease



A band of muscle fibers, the lower esophageal sphincter, closes off the esophagus from the stomach. If the sphincter does not close properly, food and liquid can move backward into the esophagus and cause heartburn and other symptoms known as gastroesophageal disease (GERD). To alleviate symptoms dietary changes and medications are prescribed. For a patient who has persistent symptoms despite medical treatment, an anti-reflux operation may be an option.

Updated by: Christian Stone, M.D., Division of Gastroenterology, Washington University in St. Louis School of Medicine, St. Louis, MO. Review provided by VeriMed Healthcare Network.

medicine. A group of medicines called H2 blockers works to lower stomach acid. Some medicines can help make the sphincter muscle stronger and help the stomach empty more quickly. If nothing else works, a person may need surgery to treat GERD, but this isn't done very often

Persistent heartburn is one of the signs of gastroesophageal reflux disease, more commonly known as GERD or acid reflux

The majority of people respond to nonsurgical measures with behavioral modification and medications

### Preventive measures

- Avoid foods that can cause problems for you.
- Eat smaller, more frequent meals throughout the day.
- Don't eat right before you go to bed. Wait 2 to 3 hours between eating and lying down or sleeping.
- Try sleeping on a special wedge-shaped pillow. Elevate the head of your bed on 6-inch blocks.

- Don't wear tight clothing - like snug jeans or a tight belt - around your middle.
- Follow your doctor's advice about your weight. In some cases, losing weight can help GERD. But never start a diet without consulting with your doctor.

- Keep a diary of GERD symptoms. Record your symptoms and see if there's a pattern. Do the symptoms happen after eating certain foods or doing certain activities? If so, you'll know which foods or activities are OK and which ones to avoid. Soon, you can be on your way to being GERD-free!

The key to living with GERD is to not ignore it. Early diagnosis and treatment can help reduce or even eliminate uncomfortable symptoms. Left untreated, however, GERD can cause permanent damage to the esophagus

You'll probably find that one of the simplest ways to make living with gastroesophageal reflux disease easier is to avoid the things that trigger your symptoms. By taking these steps and working with your doctor, you'll soon discover that GERD doesn't have to limit what you can do.

### Citations:

- Gastroesophageal Reflux Disease (GERD) Reviewed by: Mitchell Cohen, MD, The Nemours Foundation
- Gastroesophageal reflux disease Updated by: Christian Stone, M.D., Division of Gastroenterology, Washington University in St. Louis School of Medicine, St. Louis, MO. Review provided by VeriMed Healthcare Network.