



GERD
(Gastroesophageal Reflux Disease)

WHAT IS IT?

Gastroesophageal Reflux Disease (GERD) is the term used to describe the heartburn which results when acidic stomach contents back up into the esophagus, the tube which goes from your mouth to the stomach. When heartburn is felt more than occasionally, it may be called GERD.

WHAT CAUSES IT?

Temporary or infrequent heartburn can come from increased acidity, fatty or spicy foods, or bending over, lying down, or exercising too much after a full meal. Chronic heartburn may be caused by a weakness in the muscular valve between the esophagus and stomach (the LES, or Lower Esophageal Sphincter). It may also be caused by slow emptying of stomach contents into the intestines. There are many physical causes of this condition. Hiatal hernia (a part of the stomach pushing through the diaphragm) can also contribute.



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WHAT ARE THE SYMPTOMS?

- ◆ Burning sensation in the chest
- ◆ Sour taste in mouth
- ◆ Regurgitation (backing up) of partly digested food
- ◆ Chronic hoarseness, sore throat or cough
- ◆ Erosion of teeth
- ◆ Unexplained chest pain
- ◆ Asthma, especially at night

HOW IS IT TREATED?

The aim of treatment is to lessen stomach acidity.

Temporary heartburn

Medication

- ◆ over-the-counter antacids (Maalox, Mylanta, Tums, etc.)
- ◆ over-the-counter histamine blockers (Pepcid AC, Tagamet HB, Zantac 75, Axid AR, etc.)
- ◆ Diet changes
 - ◆ avoid citrus fruits and juices
 - ◆ avoid coffee and tea (even decaffeinated)
 - ◆ avoid cola and alcoholic beverages
 - ◆ eat small meals 5-6 times daily instead of 3 large meals
 - ◆ consult with nutritionist
- ◆ Habit changes
 - ◆ don't exercise, bend over, lie down, or sleep after meals
 - ◆ avoid tight or constricting clothing over waist and abdomen
 - ◆ overweight persons should lose weight
 - ◆ smokers should stop smoking

Other Suggestions



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- ◆ raise the head of your bed 6-8 “ or sleep on your back with extra pillows
- ◆ use a wedge or bolster under your pillows

Chronic heartburn (GERD)

Medication

- ◆ Prescription strength histamine blockers and strong acid reducers (Prevacid, Prilosec, etc.)
- ◆ Esophageal lining substances (Carafate)
- ◆ Stomach-emptying speeders (Propulsid, Reglan, Duvold, Urecholine, etc.)

Other Suggestions

- ◆ Possible surgical strengthening of LES muscle, usually a laparoscopic (“belly-button” incision) procedure

GOOD HEALTH PRACTICES

- ◆ GERD should be treated aggressively , continuously, and for an indefinite period of time. If untreated, there is an increased risk of esophageal _____
- ◆ Sporadic treatment may not protect enough
- ◆ Watch for over-the-counter drugs that may increase stomach acidity
- ◆ Ask your doctor for substitutes for any prescription drugs that may increase acidity
- ◆ Ask your doctor for a consultation with a gastroenterologist (stomach specialist) if your heartburn occurs more often than 2-3 times per week
- ◆ An esophageal biopsy may be needed to decide if the cells lining the esophagus having pre-cancerous changes



POSSIBLE DANGER SIGNS: WHEN TO CALL THE DOCTOR

- ◆ Heartburn that occurs more than 2-3 days per week
- ◆ Self-medication has not controlled the symptoms
- ◆ Symptoms have increased in severity
- ◆ Dietary and life-style changes have not controlled the symptoms
- ◆ Symptoms continue despite prescription medication
- ◆ Nausea, vomiting or bleeding occur



RESOURCES

American College of Gastroenterology

- ◆ hot line- 1-800-HRT-BURN
- ◆ write them at 4900 B South 31st. Street, Arlington, VA 22206
- ◆ FAX - 703-931-4520 (The booklet - "Is it just a little heartburn -or something more serious?" and video is available)

National Digestive Disease Information Clearinghouse - 301-654-3810