

Gastroesophageal Reflux

What is Gastroesophageal Reflux Disease (GERD) or Heartburn?

Gastroesophageal reflux refers to the backward flow of acid from the stomach up into the esophagus. People will experience heartburn, also known as acid indigestion, when excessive amounts of acid reflux into the esophagus. Most people describe heartburn as a feeling of burning chest pain, localized behind the breastbone that moves up toward the neck and throat. Some even experience the bitter or sour taste of the acid in the back of the throat. The burning and pressure symptoms of heartburn can last as long as 2 hours and are often worsened by eating food.

How Common is GERD?

Over 60 million Americans experience acid indigestion at least once a month and some studies have suggested that over 15 million Americans experience acid indigestion daily. Symptoms of acid indigestion are more common among the elderly and women during pregnancy.

What Are the Treatments of GERD?

In many cases, doctors find that acid indigestion can be controlled by modifying lifestyles and proper use of over-the-counter medicines.

Avoid foods and beverages which contribute to acid indigestion: chocolate, coffee, peppermint, greasy or spicy foods, tomato products and alcoholic beverages.

Stop smoking. Tobacco stimulates stomach acid production and relaxes the muscle between the esophagus and the stomach, permitting acid reflux to occur.

Reduce weight if obese.

Avoid eating 2-3 hours before sleep.

Take an over-the-counter antacid or an H2 blocker, some of which are now available without a prescription.

When Should You See a Doctor about GERD?

When symptoms of acid indigestion are not controlled with modifications in lifestyle, and over-the-counter medicines are needed more often than twice a week, you should see your doctor.

When GERD is left untreated serious complications can occur, such as severe chest pain that can mimic a heart attack, esophageal stricture (a narrowing or obstruction of the esophagus), bleeding, or Barrett's esophagus (a pre-malignant condition of the esophagus). Symptoms suggesting that serious damage has already occurred include:

Dysphagia: A feeling that food is trapped behind the breast bone.

Bleeding: Vomiting blood or tarry, black bowel movements.

Choking: Sensation of acid refluxed into the windpipe causing shortness of breath, coughing, hoarseness of the voice.

What Type of Tests are Needed to Evaluate GERD?

Your doctor may wish to evaluate your symptoms with additional tests when it is unclear whether your symptoms are caused by acid reflux, or if you suffer from complications of GERD such as dysphagia, bleeding, choking, or if your symptoms fail to improve with prescription medications.

Barium Esophagram or Upper GI X-Ray

This is a test where you are given a chalky material to drink while X-rays are taken to outline the anatomy of the digestive tract.

Endoscopy

This test involves insertion of a small lighted flexible tube through the mouth into the esophagus and stomach to examine for abnormalities. The test is usually performed using medicines to sedate you.

Esophageal Manometry or Esophageal pH

This test involves inserting a small flexible tube through the nose into the esophagus and stomach in order to measure pressures and function of the esophagus. With this test, the degree of acid refluxed into the esophagus can be measured as well.

Surgery

Surgeons perform anti-reflux surgery on patients with longstanding gastroesophageal reflux disease not controlled with medication. The surgical technique attempts to improve the natural barrier between the stomach and the esophagus that prevents acid reflux from occurring.

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