

Gastroesophageal Reflux (GERD)

Gastroesophageal Reflux is an irritation of the swallowing tube (also called the esophagus) by acid that comes up from the stomach. Gastroesophageal reflux is also called “**acid reflux**.” People who have pain may call it “**acid indigestion**” or “**heartburn**.” Despite its name, heartburn has nothing to do with the heart (although some of the symptoms are similar to a heart attack).

What causes gastroesophageal reflux?

When swallowing, food passes down the throat and through the esophagus to the stomach. Normally, a muscular valve called the lower esophageal sphincter opens to allow food into the stomach (or to let air out with burping); then it closes again. Next, the stomach releases strong acids to help break down the food.

When the lower esophageal sphincter opens too often or does not close tight enough, stomach acid can reflux, or wash back into the esophagus, causing damage to the lining. Some people have heartburn pain when reflux happens. Some people feel nothing. Other symptoms include a bitter taste in your mouth, coughing at night, hoarseness in the morning, or worsening asthma.

What can I do to prevent or reduce reflux?

- Limit coffee to 2-3 cups per day. Limiting consumption of other caffeine-containing beverages (tea, soft drinks) may also be helpful.
- Tight belts, tight pants or girdles can increase the pressure on the stomach.
- Foods to avoid are:
 - Spicy and fatty foods
 - Tomato and citrus juices (such as grapefruit and orange juices)
 - Chocolate, mints, coffee, tea, cola, and alcoholic drinks.
- Allow gravity to work. Also, avoid bending over at the waist to pick up things; instead bend at the knees.
- If you cannot stop, decreasing the number of cigarettes you smoke may help.
- Elevate the head of your bed 2-6 inches with wood blocks or bricks. Using extra pillows is NOT a good substitute. Use of a foam wedge beneath the upper half of the body is an alternative
- Excess weight increases the amount of pressure constantly placed on your stomach. Even small amounts of weight loss may help.
- Can be taken at bedtime and 30-60 minutes after each meal or as directed by your physician.
- These medications should be taken 30-60 minutes before meals.
- Don't overfill your stomach.

Over-the-counter (OTC) treatment

Antacids reduce the effect of (neutralize) the acid in your stomach. They can provide fast, short-term relief. Many OTC medicines combine different antacids. OTC examples:

- Tums
- Mylanta
- Rolaids
- Maalox

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H2 blockers reduce the amount of acid your stomach makes. While they don't relieve symptoms right away, H2 blockers relieve symptoms for a longer period of time than antacids. They usually start to work within an hour. OTC examples:

- Pepcid (famotidine)
- Tagamet (cimetidine)
- Zantac (ranitidine)

Proton pump inhibitors greatly reduce your body's production of acid. They work well for heartburn that isn't resolved by antacids or H2 blockers. It may take a little longer for a proton pump inhibitor to help your symptoms than an H2 blocker, but relief will last longer. These medicines are most helpful for people who have heartburn often – more than 2 days a week.

OTC examples:

- Prilosec OTC (omeprazole)
- Zegerid (omeprazole + sodium bicarbonate)
- Prevacid (lansoprazole)

OTC treatments for GERD can interact with many prescription and other OTC medications. Please discuss treatment options with your healthcare provider in order to determine which medication works best for you.