GERD (Gastroesophageal Reflux Disease) (FAQs)

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GERD is the back up of stomach acid into the esophagus.

<u>GERD</u> (also known as gastroesophageal reflux disease, acid reflux, and/or <u>heartburn</u>) is a condition in which the acidified liquid content of the stomach backs up into the esophagus.

When refluxed stomach acid touches the lining of the esophagus, it may cause a burning sensation in the chest or throat called heartburn or acid <u>indigestion</u>. Less commonly, the acid refluxes all the way up and into the throat, and food or acid can be tasted in the mouth.



People of all ages can have GERD.

As for babies, it's common for new babies to have tummy troubles. Babies with digestion problems may have gas, <u>constipation</u>, <u>diarrhea</u>, or they may spit up throughout the day. In fact, more than half of all infants under 3 months old have GERD.

The most common symptoms of GERD in children are:

- Frequent or recurrent vomiting
- Frequent or persistent cough
- Refusing to eat or difficulty eating (choking or gagging with feeding)
- Crying with feeding
- Heartburn, or abdominal pain

Like adults, GERD is due to the upward movement of stomach contents into the esophagus and sometimes into or out of the mouth.



People with GERD should avoid foods and beverages such as what? People with GERD should avoid foods and beverages such as mint, tomatoes, mustard, <u>caffeine</u>, alcoholic drinks, pepper, oranges, grapefruit, and vinegar. The list below includes some food and drink tips for nighttime heartburn relief, and includes foods that heartburn sufferers would benefit by avoiding.

- Prevent heartburn by limiting acidic foods, such as grapefruit, oranges, tomatoes, or vinegar if these usually cause heartburn as well as any other foods that cause heartburn.
- Avoid greasy or fatty foods (like French fries and cheeseburgers) if they trigger heartburn.
- You may want to cut back on chocolate, mint, citrus. Avoid alcohol, drinks with caffeine, and carbonated drinks.
- Eat smaller meals, and you may avoid triggering GERD symptoms.
- Eating close to bedtime can lead to reflux and trigger heartburn symptoms.
- Reduce your nighttime heartburn risk: Eat meals two to three hours before sleep.



Reflux is an alternative term for what? Here, the term "reflux" refers to esophageal reflux, which is another term for regurgitation.

Specifically, regurgitation refers to a backward flowing. The term may be used to describe backward flow into the esophagus but is often used to mean backward flow into the throat or mouth.

As seen with GERD, the liquid content of the stomach regurgitates (backs up or refluxes) into the esophagus. The regurgitated liquid usually contains acid and pepsin that are produced by the stomach. (Pepsin is an enzyme that begins the digestion of proteins in the stomach.)



There is no cure for GERD.

GERD is a chronic condition, which means there is no cure. Once it begins, it usually is life-long. If there is injury to the lining of the esophagus (<u>esophagitis</u>), this also is a chronic condition.

GERD is treated with lifestyle changes, antacids, foam barriers, surgery, <u>endoscopy</u>, and medications such as histamine antagonists (H2 blockers), proton pump inhibitors (PPIs), and pro-motility drugs.



Completely accurate diagnostic test for GERD does not exist !

GERD may be diagnosed or evaluated by a trial of treatment, endoscopy, biopsy, X-ray, 24 hour esophageal acid testing, and esophageal acid perfusion.



Barrett's esophagus is a potentially serious complication of GERD.

<u>Barrett's esophagus</u> is a potentially serious complication of chronic GERD, primarily in white males. With Barrett's esophagus, cells of the tissue lining the esophagus -- the tube that carries food from the mouth to the stomach--take on an abnormal appearance, resembling cells of the lining of the intestine. In a small proportion of patients, the Barrett's tissue becomes precancerous and then cancerous.

About 10% to 15% of people with chronic symptoms of GERD develop Barrett's esophagus.



Who is most likely to suffer from GERD? <u>Obesity</u>, pregnancy and <u>smoking</u> are all factors that contribute to the development of GERD.

Further, no one knows the exact cause of gastroesophageal reflux. The following are contributing factors that can weaken or relax the lower esophageal sphincter and possibly make reflux worse:

- Use of alcohol or cigarettes, obesity
- Medications such as calcium channel blockers (CCBs), theophylline, nitrates
- Fatty and fried foods, chocolate, caffeine, citrus fruits, tomatoes, mint
- Eating large meals
- Eating close to bedtime
- Hiatal hernia, pregnancy, diabetes, rapid weight gain

Note: Hiatal <u>hernia</u> is a condition when the upper part of the stomach protrudes up above the <u>diaphragm</u> (the strong muscle that separates the organs of the chest from those of the abdomen).



Is it possible to prevent GERD?

The best and safest way to prevent GERD from occurring is to change the things that cause reflux.

You may notice that many of the <u>prevention</u> methods below are also lifestyle changes that one can use to manage GERD symptoms.

- Maintain a healthy body weight
- Avoid large meals and eating within 3 hours of bedtime
- Limit fatty or greasy foods, chocolate, and caffeine
- Avoid alcohol
- Stop smoking
- Avoid working out, bending, or stooping on a full stomach



GERD is closely linked to esophageal cancer.

Adenocarcinoma of the esophagus (esophageal <u>cancer</u>, cancer of the esophagus) is strongly linked to GERD.

Adenocarcinoma refers to cancer that forms in tissues lining the esophagus (the muscular tube through which food passes from the throat to the stomach).

There are two types of esophageal cancer:

- Squamous cell carcinoma (cancer that begins in flat cells lining the esophagus)

- Adenocarcinoma (cancer that begins in cells that make and release mucus and other fluids). It frequently occurs in patients with Barrett's esophagus that has developed precancerous changes.

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