

Relief from Reflux

It starts with a burning in the chest—maybe a sour taste in the mouth. You reach for the antacids repeatedly, but the problem continues.

According to the American Gastroenterology Association, approximately 20 million people experience heartburn daily, and twice as many experience symptoms at least once per week.

When heartburn strikes this frequently, it's often the result of a chronic, more serious condition called GERD, or gastroesophageal reflux disease.

Recognizing GERD

Heartburn is the main symptom of GERD. It occurs when acid from the stomach flows backwards into the esophagus. This is usually a result of a faulty lower esophageal sphincter (or LES), which sits where the stomach meets the esophagus and is designed to prevent the contents of the stomach from regurgitating back up into the esophagus.

“While heartburn and regurgitation (retasting food eaten earlier) are the more common symptoms of gastroesophageal reflux disease, there are other, less classic symptoms,” says gastroenterologist Stephen J. Heller, MD. “Chronic coughing, hoarseness and even asthma have all been linked to GERD.”

According to Heller, one of the best ways to diagnose GERD is through a careful medical history. “Then we might try the medications which, if they work, are helpful in both diagnosing and treating GERD.” Standard over-the-counter antacids can provide relief for individuals with mild symptoms, but people with GERD may benefit from more powerful medications such as proton pump inhibitors, which help block the production of stomach acid.

Innovative Treatments

Eliminating factors that contribute to GERD is an important part of any treatment plan. “Many of the lifestyle triggers for GERD have been well defined,” says Heller. “But each person needs to figure out what works for him or

her.” Eliminating smoking, caffeine, alcohol, carbonated beverages, mint candy, spicy foods, citrus and stress can all be helpful.

He also cautions patients not to eat at night, and suggests elevating the head of the bed four to six inches if symptoms interrupt sleep. “Some people achieve this effect with pillows,” says Heller. “But it works better if you elevate the entire bed with a wedge or a block.”

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Another treatment option is Nissen fundoplication, a surgical procedure where the stomach is pulled up and wrapped around the lower esophagus to create a barrier that keeps acid from creeping up. Today, the surgery can be done using a minimally invasive technique, which means less risk of complications and a shorter recovery time. “It's helpful for some people,” says Heller, “but not all.”

When left untreated, GERD can lead to long-term problems, including Barrett's esophagus—a change in the lining of the esophagus that may increase the risk of cancer. “A lot of people try to treat their symptoms themselves,” says Heller. “But if you think you might have GERD, you should seek help.”

To make an appointment with a gastroenterologist at Lahey, call 781-744-3250.



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