

# Thompson Peak Gastroenterology and Hepatology

480-945-2321

Dr. Gavin Levinthal

Dr. Stuart Triester

Kristin Cauley, NP-C

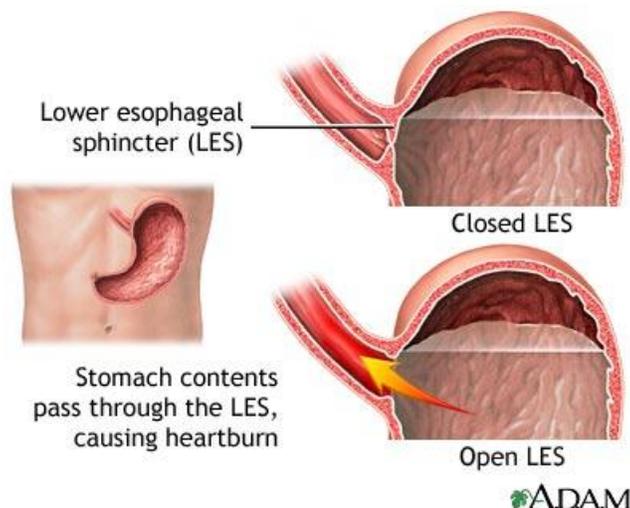
## Gastroesophageal Reflux Disease

### ***What is Gastroesophageal Reflux Disease?***

Gastroesophageal reflux disease (GERD) is a condition in which the stomach contents (food or liquid) leak backwards from the stomach into the esophagus (the tube from the mouth to the stomach). This action can irritate the esophagus, causing heartburn and other symptoms.

### ***What causes Gastroesophageal Reflux Disease?***

When you eat, food passes from the throat to the stomach through the esophagus (also called the food pipe or swallowing tube). Once food is in the stomach, a ring of muscle fibers prevents food from moving backward into the esophagus. These muscle fibers are called the lower esophageal sphincter, or LES. If this sphincter muscle does not close well, food, liquid, and stomach acid can leak back into the esophagus. This is called reflux or gastroesophageal reflux. This reflux may cause symptoms, or can even damage the esophagus.



## ***What are the symptoms of Gastroesophageal Reflux Disease?***

- Heartburn or a burning pain in the chest (under the breastbone)
  - Increased by bending, stooping, lying down, or eating
  - More likely or worse at night
  - Relieved by antacids
- Feeling that food may be stuck behind the breastbone
- Nausea after eating
- Cough or wheezing
- Difficulty swallowing
- Hiccups
- Hoarseness or change in voice
- Regurgitation of food
- Sore throat

## ***How is Gastroesophageal Reflux Disease diagnosed?***

Many times GERD is diagnosed by obtaining a detailed history of your symptoms. You may not need any tests if your symptoms are not severe.

If your symptoms are severe or they come back after you have been treated, one or more tests may help diagnose reflux or any complications:

- Esophagogastroduodenoscopy (EGD) is often used to identify the cause and examine the esophagus (swallowing tube) for damage. The doctor inserts a thin tube with a camera on the end through your mouth. The tube is then passed into your esophagus, stomach, and small intestine.
- Barium swallow
- Continuous esophageal pH monitoring
- Esophageal manometry

Sometimes symptoms of GERD can mimic symptoms of a life threatening condition such as a heart attack. Your doctor can determine whether or not additional testing is needed prior to making an official diagnosis of GERD.

## ***How is Gastroesophageal Reflux Disease treated?***

Gastroesophageal Reflux Disease can often be treated by avoiding foods that cause symptoms such as:

- Alcohol
- Caffeine
- Carbonated beverages
- Chocolate
- Citrus fruits and juices

- Tomatoes
- Tomato sauces
- Spicy or fatty foods
- Full-fat dairy products
- Peppermint
- Spearmint

Quitting smoking- saliva helps to neutralize acid and smoking reduces the amount of saliva produced. Smoking can also make reflux worse because it relaxes the lower esophageal sphincter (LES) and allows acid to enter the esophagus.

Losing weight can help reduce the pressure within the abdomen and can reduce the symptoms of reflux.

Avoid eating before bed- lying down with a full stomach can increase the chance of reflux.

Avoid large meals- an over distended stomach increases the chance of reflux.

Avoid clothes that fit tightly around the waist- this can put additional pressure on your stomach forcing contents to enter the esophagus.

After you and your doctor discuss your symptoms, an acid blocker medication may be recommended.