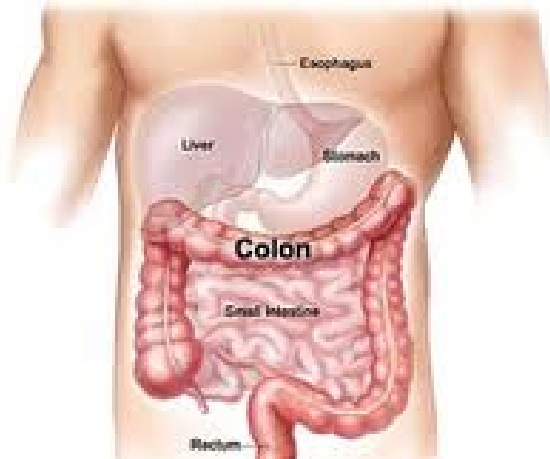


ACID REFLUX

Acid Reflux

A tube (esophagus) carries food from the throat to the stomach. Along the way a ring of muscle (lower esophageal sphincter) opens to allow food to pass. When weakened, this doesn't close all the way and stomach acids seep back into the esophagus, causing acid reflux.



Symptoms

- Bitter taste from bile & stomach acids

The symptoms of heartburn can include:

- Burning pain behind the breastbone area.
- Burning pain or reflux symptoms that is worse when one is lying down or bending over.

Some people have reflux that damages the lining of the esophagus, but they have no symptoms to alert them that acid injury is occurring.

- Avoid food, beverages and medicines that affect the lower esophageal sphincter muscle action or irritate the lining of the esophagus, such as:
 - Aspirin, anti-inflammatory and pain medications other than acetaminophen.
 - Decrease the size of portions at mealtimes. Don't overeat!
 - Eat meals two to three hours before lying down.

- Elevate the head of the bed four to six inches using blocks or telephone books.
- If you are overweight, lose weight.
- Avoid situations that can increase the pressure on the abdomen, as they will cause more reflux. Try simple things like avoiding tight clothing or control top hosiery and body shapers. Stop smoking, as cigarettes decrease the ability of the lower esophageal sphincter muscle to work properly.

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There are usually no early symptoms of colorectal cancer. That's why so many people who do not get screenings die. By the time it is discovered, it is often too late.

Symptoms include:

Rectal bleeding Cramping
Weight loss Constant fatigue

If Symptoms Persist Long Term

For occasional heartburn, over-the-counter medicines taken as directed can be helpful in reducing symptoms. If prolonged or frequent use of nonprescription medicines (more than directed on the product) becomes necessary, or if they do not completely control symptoms, a gastroenterologist should be consulted.

People with severe esophageal reflux or heartburn symptoms unresponsive to the measures described above may need a more complete diagnostic evaluation. A variety of tests and procedures are currently used to further evaluate the patient with heartburn.

It can lead to very serious problems including cancer

Causes

- Large Meals
- Fried, Fatty Foods
- Smoking
- Chocolate
- Alcohol
- Caffeine
- Citrus Fruits & Juices
- Peppermint & Spearmint
- Carbonated beverages
- Ketchup & Mustard
- Vinegar
- Tomato Sauce
- Citrus Fruits & Juices

Treatment

- Avoid causes
- Eat smaller & more frequent meals, slowly
- Don't eat at least 2 hours before bedtime
- Elevate head of bed by 4-10 inches
- Lose weight
- Moderate exercise
- Wear loose fitting clothes
- Antacids (liquids)
- Medications, and if this fails, surgery is an option
- Avoid food, beverages and medicines that affect the lower esophageal sphincter muscle action or irritate the lining of the esophagus, such as:
 - Fried or fatty foods.
 - Chocolate.
 - Peppermint.
 - Alcohol.
 - Coffee (decaf too).
 - Carbonated beverages.
 - Ketchup and mustard.
 - Vinegar.
 - Tomato sauce.
 - Citrus fruits or juices.
- Aspirin, anti-inflammatory and pain medications other than acetaminophen.
- Decrease the size of portions at mealtimes. Don't overeat!
- Eat meals two to three hours before lying down.
- Elevate the head of the bed four to six inches using blocks or telephone books.

- If you are overweight, lose weight.
- Avoid situations that can increase the pressure on the abdomen, as they will cause more reflux. Try simple things like avoiding tight clothing or control top hosiery and body shapers. Less obvious causes include sit-ups, leg-lifts or abdominal crunches.
- Stop smoking, as cigarettes decrease the ability of the lower esophageal sphincter muscle to work properly.

When to See a Doctor

After 2 weeks ask your doctor to consult a gastroenterologist for additional tests to rule out more serious conditions.

Treatment & Questions

Talk to your gastroenterologist to make an informed decision about what is right for you.



The muscle (lower esophageal sphincter) located between the esophagus and stomach normally opens after swallowing. This allows food to pass into the stomach. This lower esophageal sphincter muscle then closes quickly to prevent the return (reflux) of food and stomach juices back into the esophagus.

When the lower esophageal sphincter muscle either relaxes inappropriately or is very weak, the acid contents of the stomach can back up, or reflux, into the esophagus. This is called gastro-esophageal reflux and typically produces heartburn, a burning sensation below the sternum where your ribs come together. In addition to heartburn, symptoms may include a persistent sore throat, hoarseness, chronic cough, asthma, heart-like chest pain and a

feeling of a lump in the throat. When the acid contents from the stomach regularly back up into the esophagus, chronic GERD can occur.

Several factors influence the occurrence and severity of gastroesophageal reflux and heartburn, including:

- The ability of the lower gastroesophageal sphincter muscle to open and close properly.
- The type and amount of stomach juices that are backed up into the esophagus.
- The clearing action of the esophagus.
- The neutralizing effect of saliva and other factors.

People experience GERD and heartburn in a variety of ways. Heartburn usually begins as a burning pain that starts behind the breastbone and radiates upward to the neck. Often there is a sensation of food coming back into the mouth, accompanied by an acid or bitter taste. Heartburn is sometimes called acid indigestion and usually occurs after meals.

If Symptoms Persist

Endoscopy

Biopsy

Esophageal Manometric Studies

Impedance Monitoring

pH (acid) Monitoring

Surgery

Some may need surgery because of severe reflux and poor response to medical treatment plans. Fundoplication is a surgical procedure that reduces reflux. Patients not wanting to take medication to control their symptoms are also candidates for surgery.

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