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Family Physicians Offer Information on Acid Reflux Disease/GERD

(COLUMBUS, Ohio)—While millions of people suffer the occasional bout of heartburn after a large or spicy meal, regularly occurring heartburn may be a sign of gastroesophageal reflux disease, commonly known as GERD.

“GERD affects around seven percent of the U.S. population on a daily basis,” says Dr. Renee Markovich, a family physician at the Akron General Center for Family Medicine. If left untreated, it can lead to esophagitis, a condition in which the lining of the esophagus becomes inflamed. Severe esophagitis can lead to bleeding and narrowing of the esophagus, which inhibits swallowing.

According to Markovich, GERD is caused by an incompetent lower esophageal sphincter. Normally, the opening between the esophagus and the stomach closes after food has passed through. In some cases, this opening does not close, allowing for stomach acid to come up into the esophagus. This is reflux, the mechanism that causes heartburn. If heartburn is experienced twice a week or more, this may be a sign of the more serious GERD. Pain in the chest, tightness of the throat and hoarseness in the morning also can be signs of GERD.

GERD also is thought to be caused by hiatal hernia. This is a condition in which the upper part of the stomach is shifted above the diaphragm, a wall of muscle separating the stomach from the chest. The diaphragm aids in keeping acid and food in the stomach. “Most people with hiatal hernia do not experience symptoms,” said Markovich, “it is not known whether or not they (GERD and hiatal hernia) are associated with each other.” Hiatal hernia is common in those older than 50 or overweight.

Other contributing factors to GERD include smoking, being overweight, being pregnant or using alcohol. “The people most affected are pregnant women and those who are overweight,” said Markovich. Some foods also contribute to GERD. These include tomato-based foods, including pizza, chili or pasta sauces; spicy foods; citrus fruit; caffeinated drinks; fatty or fried foods; and chocolate. Minimizing these foods in one’s diet can help to avoid the pain of GERD.

Mild symptoms of GERD can be treated with over-the-counter antacid. “GERD is treated with a combination of medications and non-medical treatments,” said Markovich. The painful symptoms of GERD can be avoided by simple changes in lifestyle. Markovich advises that one avoid caffeine and alcohol or reclining at least three to four hours after a meal. Eating smaller meals and wearing looser clothing also can help. GERD also can be aggravated by the use of aspirin, ibuprofen or other medications.

Untreated and prolonged GERD can lead to more serious conditions. According to Markovich, the worst case scenario is a condition called Barrett’s esophagus, which is a pre-cancerous lesion in the lining of the esophagus. In some cases, chest pain can be mistaken for heartburn or GERD when in fact it could be a sign of heart disease. “It is very hard to distinguish. If you have any chest pain, you must go to your family physician,” says Markovich.

2-2-2 Family Physicians Offer Information on Acid Reflux Disease/GERD

Markovich also advises that anyone whose reflux symptoms are not relieved by over-the-counter medications, persist longer than four weeks or are associated with weight loss and blood in vomiting or in bowel movements see a family physician immediately.

The Ohio Academy of Family Physicians is a statewide professional association with more than 4,400 members, including practicing physicians, family medicine residents and medical students. The scope of family medicine encompasses all ages, both sexes and every disease entity. Family physicians provide comprehensive, continuing care to all members of the family.

FACT SHEET

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Contributing Factors to GERD:

- Tobacco
- Coffee (regular and decaffeinated) and other drinks that contain caffeine
- Alcohol
- Citrus fruits
- Tomato-based foods, including chili, pasta sauces and pizza
- Chocolate
- Mint or peppermint
- Fatty and fried foods
- Spicy foods
- Onions
- Being overweight
- Aspirin or ibuprofen
- Other medications

Tips on Preventing GERD:

- Eat smaller meals
- Lose weight if you are overweight
- Eat high-protein, low-fat meals
- Avoid wearing tight clothing and tight belts
- Avoid foods that trigger heartburn
- Wait three to four hours after a meal before lying down
- See your family physician if heartburn occurs more than twice a week

Consult Your Family Physician If:

- You have pain when swallowing or trouble swallowing
- You are vomiting blood
- Your stools are bloody or black
- You are having shortness of breath
- You are dizzy or lightheaded
- You have pain going into your neck and shoulders
- You breakout in a sweat when you have pain in your chest
- You have heartburn often (more than three times a week) for more than two weeks