Gastro-Esophageal Reflux Disease is a condition that affects the circular band of muscle, called a sphincter, located at the bottom of the esophagus (the tube from the throat to the stomach opening). This causes food to flow back from the stomach into the esophagus, leading to a stinging or a burning feeling in the chest area. This backflow is called reflux. We call this feeling heartburn, even though the condition does not involve the heart.

Causes and Symptoms of GERD

There is no single cause of GERD. Symptoms will vary with the individual, but typically they are mild. Chronic heartburn is the most common one. Other symptoms are a sour and bitter taste in the mouth, belching, difficulty swallowing, sore throat, laryngitis, throat clearing, chronic cough, inflammation of the gums, erosion of the enamel of the teeth and regurgitation, where the acidic contents from the stomach comes up into the throat.

How is GERD diagnosed?

A doctor can diagnose GERD by its symptoms alone, but sometimes additional tests are needed using:
- Proton Pump Inhibitor medication
- Endoscopy
- Measurement of the pressure in the esophagus
- Monitoring of acid in the esophagus
- Signs of narrowing of the esophagus

Cancer Risk Associated with GERD

Having heartburn regularly can damage the tissue of the esophagus. Tissue damage can lead to stricture (narrowing of the esophagus due to scarring), ulcers, and bleeding. Stricture makes it difficult to swallow. Seek medical help if your heartburn:
- Happens more than once a week.
- Becomes more severe.
- Occurs at night and wakes you up.

A condition called Barrett’s esophagus can occur if the lining of the esophagus is damaged. This increases the risk for cancer of the esophagus. In the absence of Barrett’s esophagus, GERD is not a risk factor for developing cancer. Barrett’s esophagus only occurs in about 10% of people with GERD, and about 0.5% of people with Barrett’s esophagus will develop cancer of the esophagus. Regular endoscopy (an internal exam of the esophagus) should be done on people suffering from Barrett’s esophagus.
GERD and the Diet

Large meals and certain foods can make heartburn worse. These foods include chocolate, onions, fried foods and other high fat foods, peppermint, alcohol, caffeinated or carbonated beverages, acidic foods like tomatoes and citrus fruits and spicy foods.

GERD and Stress

Although stress does not increase the total amount of reflux, it does make the esophagus more sensitive to acid. People often perceive that GERD symptoms are more frequent and severe during stressful times.

The Truth about GERD

- GERD is not caused by the food you eat, but certain foods can aggravate it.
- GERD, without Barrett’s esophagus, does not increase risk of esophageal cancer.
- GERD is not caused by the Helicobacter pylori (H. Pylori) bacteria, the bacteria that causes stomach ulcers.
- There is no cure for GERD.

Recommendations for Managing GERD

1) Avoid foods that bother you.
2) Stay away from alcohol and smoking.
4) Don’t lie down for three to four hours after eating.
5) Don’t bend over or do exercises that increase pressure on the stomach like stomach crunches.
6) Elevate the head of your bed by about 6 inches.
7) Sleep on your side, especially your left side.
8) Take medications as instructed by your doctor.