**Lifestyle Changes**

- If you smoke, stop.
- Avoid foods and beverages that worsen symptoms.
- Lose weight if needed.
- Eat small, frequent meals.
- Wear loose-fitting clothes.
- Avoid lying down for 3 hours after a meal.
- Raise the head of your bed 6 to 8 inches by securing wood blocks under the bedposts. Just using extra pillows will not help.

**IF GERD SYMPTOMS PERSIST**

See your health care provider if you have had symptoms of GERD and have been using antacids or other over-the-counter reflux medication for more than 2 weeks.

Most physicians can treat GERD. Depending on your symptoms and condition, you may be referred to a gastroenterologist—who is a doctor who treats diseases of the stomach and intestines.

**POINTS TO REMEMBER**

- Frequent heartburn is the most common symptom of GERD in adults.
- Anyone experiencing heartburn twice a week or more, may have GERD.
- You can have GERD without heartburn. You may have dry cough, asthma symptoms or trouble swallowing.
- If you have been using antacids more than two weeks, it is time for you to see your health care provider. Most doctors can treat GERD.

**Hope through Research**

The reasons certain people develop GERD and others do not, is unknown. Several factors may be involved and research is under way to explore risk factors for developing GERD and the role of GERD in other conditions such as asthma and laryngitis.

**For More Information**

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**G.E.R.D.**

is caused by frequent acid reflux—the backup of stomach acid or bile into the esophagus. It is generally a treatable disease.

**SYMPTOMS**

The most frequent symptoms of GERD are so common that they may not be associated with a disease. Self-diagnosis often occurs but be aware that proper treatment is needed.

The main symptom in adults is frequent heartburn, also called acid indigestion. This is a burning-type pain in the lower part of the mid-chest, behind the breast bone, and in the mid-abdomen. Repeated heartburn is the symptom that happens most often with GERD, but it is not the only symptom of GERD. The disease may be present without heartburn or other obvious symptoms.

A dry cough, asthma symptoms, or trouble swallowing are also symptoms of GERD.

**CAUSES**

It is unclear why some people develop GERD. Research shows that in people with GERD, the lower esophageal sphincter (LES)—which is a ring of muscle at the bottom of the esophagus that acts like a valve between the esophagus and the stomach, relaxes while the rest of the esophagus is working. This causes digestive juices, called acids—to rise up with the food.

Anatomical abnormalities such as a **hiatal hernia** may also contribute to GERD. A hiatal hernia occurs when the upper part of the stomach and the lower esophageal sphincter move above the diaphragm, the muscle wall that separates the stomach from the chest. Acid reflux can occur more easily when a hiatal hernia is present.

Other factors that may contribute to GERD include:

- Obesity
- Pregnancy
- Smoking

Common foods that can worsen reflux symptoms include:

- Citrus fruits
- Chocolate
- Drinks with caffeine or alcohol
- Fatty and fried foods
- Garlic and onions
- Mint flavorings
- Peppermint
- Spicy foods
- Acidic foods like oranges, tomatoes, and pizza.

**TREATMENT**

Many over-the-counter antacids or medications that stop acid production are recommended to relieve GERD symptoms. You can buy many of these medications without a prescription. These include:

**Antacids**—such as Alka-Seltzer, Maalox, Mylanta, Rolaids, and Riopan are usually the first drugs used to relieve heartburn and other mild GERD symptoms. There are many brands on the market that use different combinations of the three basic salts—magnesium, calcium, and aluminum—with hydroxide or bicarbonate ions to neutralize acid in the stomach.

Antacids can have side effects. Magnesium salt can lead to diarrhea, and aluminum salt may cause constipation. Aluminum and magnesium salts are often combined in a single product to balance these effects.

**H2 blockers**—such as Tagamet HB, Pepcid AC, Zantac 75—these decrease acid production. They are available in prescription strength and over-the-counter (O.T.C.) strength. They provide short-term relief and are effective for about 50% of those with GERD symptoms.

**Proton pump inhibitors** include omeprazole (Prilosec, Zegerid), lansoprazole (Prevacid) pantoprazole (Protonix), rabeprazole (Aciphex), and esomeprazole (Nexium), which are available by prescription. Prilosec is also available in over-the-counter strength. Proton pump inhibitors are more effective than H2 blockers and can relieve symptoms and heal the esophageal lining in almost everyone who has GERD.

**Prokinetics** help strengthen the LES and make the stomach empty faster. *Urecholine* (bethanechol) and *Reglan* (metoclopramide) are in this group. Prokinetics have frequent side effects that limit their usefulness—fatigue, sleepiness, depression, anxiety, and problems with physical movement.

Drugs work in different ways and combinations of medications may help control symptoms. Depending of the severity of GERD, treatment may include lifestyle changes, medications, or surgery.