



# Feeling the Burn?

## *Understanding and controlling acid reflux and heartburn*

TEXT BY KEITH GILLOGLY

If you need another reason to resist ordering that big steak and piece of chocolate cake at dinner, consider that such fatty foods can fuel heartburn. Heartburn results from acid reflux, which occurs when stomach contents and digestive acids travel up from the stomach into the esophagus. A valve between the esophagus and stomach opens for food to enter the stomach, but acid can travel up into the esophagus if the sphincter doesn't fully shut. When this is coupled with a large volume of food to digest, problems often arise.

### **Know your symptoms**

While reflux can cause sore throat, coughing and a bitter taste in the mouth, heartburn — the burning sensation in the chest — is its most recognized symptom. Because fatty foods take longer to digest and stay in the stomach for up to six hours, they're often heartburn culprits, says Dr. Paul Schleinitz, a Medford gastroenterologist with Gastroenterology Consultants. With age and a lifetime of strain and wear, the sphincter between the esophagus and stomach can become stretched and less functional, as well.

Occasional heartburn after overeating is common, but if it's happening more than twice a week, the chronic condition gastroesophageal reflux disease, or GERD, could be present. Between seven and 10 percent of American adults experience symptomatic GERD on a daily basis, says Dr. Neil Olsen, a primary care physician with Providence Medical Group-Central Point. Being overweight can also contribute to acid reflux because of the increased weight and pressure on the stomach. "As the population in our country is getting heavier, we're seeing more and more reflux," Schleinitz says.

*“As the population in our country is getting heavier, we’re seeing more and more reflux.”*

— Dr. Paul Schleinitz,  
Gastroenterology Consultants

### Preventing reflux

Take note of foods that have caused reflux, and avoid or decrease consuming them. Lower-fat meals will be digested more quickly, triggering less reflux. Heartburn often strikes at night; don’t snack before bed. “Go to bed with an empty stomach three to four hours before you lie down,” Schleinitz advises. As a general rule, don’t lie down right after eating, and for the night, elevate the head of your bed four to six inches to let gravity help keep reflux down. Simply bending over to tie your shoe can cause a volume of liquid to come up, Schleinitz says, so keep activity to a minimum right after eating. Quitting smoking will help reduce reflux, as will losing weight, even if it’s just 10 or 15 pounds. Alcohol can irritate both the stomach and esophagus, worsening heartburn.

### Beware untreated reflux

“The pH of the esophagus is relatively neutral,” Olsen says. “Stomach contents have a pH down close to one, which is acidic.” If left unchecked, irritation and inflammation from GERD can cause esophageal ulcers, as well as swelling and scarring. Scar tissue can lead to an esophageal stricture, a narrowing of the esophagus, which can cause swallowed food to get stuck in the tube, sometimes requiring emergency surgery. Bile can also be forced up and cause more damage. While men and women are just as likely to experience heartburn, Barrett’s esophagus is much more common in men, Olsen says. Barrett’s esophagus occurs when the lining of the esophagus changes to resemble that of the stomach. It’s caused by uncontrolled reflux and can lead to cancer. Severe reflux can also result in acid getting into the lungs, causing coughing, asthma and lung damage.

### Seeing the doctor

If your heartburn isn’t coming under control easily with an antacid, Schleinitz recommends seeing a doctor. Doctors may conduct an endoscopy to look inside the esophagus and scope out any ulcers, strictures or any other damage or precancerous conditions. If you notice regurgitation occurring more frequently, and if it’s happening more than twice a week or even daily, consult a doctor. Be wary that heartburn chest pain can be similar to a heart attack, which would require immediate attention. If you’ve had a hiatal hernia, which occurs when the esophageal sphincter doesn’t line up with the diaphragm, as part of the stomach slides up into the thorax, you’re at greater risk for reflux. ■



## PREVENTION PILLS: MEDICATIONS TO KEEP REFLUX IN CHECK

You won’t have to look hard to find medications to curb acid reflux and reduce heartburn. Some types counteract heartburn after it has occurred, and others set to work before heartburn flares up. Of the various types, many are available over-the-counter, although you should consult a doctor if you have frequent reflux. Antacids like Tums or Rolaids work to neutralize the acid that causes agitation. They provide temporary relief after the burning sensation has set in, and they’re even a good source of calcium, Olsen notes. H2 blockers are medications that block one of the mechanisms that stimulate acid production in the stomach. Proton pump inhibitors, or PPIs, include medications such as Prilosec or Prevacid, which also limit production of digestive acids to reduce agitation. They’re considered stronger than antacids and H2 blockers and are typically used by those who experience more frequent reflux and need to proactively prevent heartburn. While these various medications are often taken long-term, addressing diet and other factors is always preferred. “If you can control it with lifestyle, then please do that,” says Olsen.



Tim MacCurdy, MPAS, PA-C



Craig A. Kraffert, M.D.  
Board Certified  
Dermatologist

## SKIN PROBLEM?

Be Seen Soon.  
Call Today!

**(541) 930-7777**



MEDFORDDERM

WEDFORD · OREGON

2924 Siskiyou Blvd.

**MedfordDerm.com**

MF-00028779