What is GERD?
GERD is short for gastroesophageal reflux disease. It is a common condition in which food and acids in the stomach move back (or reflux) into the esophagus. When reflux continues, GERD develops. Here’s how reflux happens:

1 Normally when you swallow food, it goes from your mouth, down your esophagus, and in to your stomach. As the food enters your stomach, it passes through a ring-shaped muscle called the lower esophageal sphincter (LES). A strong and healthy LES opens to let food into the stomach and closes to prevent food and stomach acid from backing up.

2 When the LES muscle is weakened, food and stomach acid can move back up into the esophagus and throat, causing reflux. Stomach acid from reflux can irritate the esophagus and cause heartburn, indigestion, and trouble swallowing.

What causes GERD?
You are more likely to get GERD if you:
• Are overweight or obese
• Eat a high-fat diet
• Drink a lot of carbonated beverages such as soda pop and beer.
• Use alcohol
• Use tobacco products
• Have a hiatal hernia or damage to your esophagus

How is GERD treated?

Lifestyle changes
You can reduce the irritation of your esophagus and often even correct mild forms of GERD with a few lifestyle changes:

• Don’t lie down for 2 hours after eating. Don’t bend over at the waist either. Let gravity help your digestion.
• Avoid foods that cause symptoms. These include alcohol, coffee, fatty foods, spicy foods, chocolate, onions, tomato sauce, carbonated beverages, and mint.
• Avoid wearing tight clothing (such as belts, pants, or girdles).
• Take an antacid at bedtime and 30–60 minutes after each meal or as directed by your doctor.
• Review all of your medicines with your doctor, especially if you are taking sedatives, tranquilizers, and some types of blood pressure medicines.
• Eat smaller meals so your stomach isn’t holding too much food at once.
• Stop smoking, or at least cut back. Ask your doctor for a copy of Intermountain’s booklet, Quitting Tobacco: Your Journey to Freedom, for tips and resources.
• Lose extra weight. Too much weight can put pressure on your stomach and cause reflux.

Medical treatment and tests
When GERD is moderate to severe, your doctor may recommend one or more of the following:
• Prescription or over-the-counter medicines. Your doctor may recommend an antacid or other medicine to control acid or to strengthen the LES. Be sure to take your medicines regularly and just as your doctor prescribes.
• Endoscopy. This procedure allows the doctor to view the inside of your esophagus with a camera to identify and sometimes treat any problems.
• Dilation. This procedure is done during an endoscopy. It stretches your esophagus if it’s constricted.

Surgery
If other treatments don’t relieve your GERD, your doctor may recommend surgery to tighten the LES.

What if I don’t treat my GERD?
If you don’t treat GERD, complications can occur. These include ulcers, bleeding, and anemia (a low number of red blood cells).

Over time, GERD can cause scarring and narrowing of the esophagus (stricture) making it difficult to swallow. It can also cause a condition called Barrett’s esophagus, which is a serious change in the health of the cells lining the esophagus.

If you have symptoms of GERD, see your doctor. Treatment can usually prevent these complications.

When should I call my doctor?
Make an appointment to see your doctor if you have these ongoing symptoms:
• Frequent heartburn or chest pain, especially when lying down
• Trouble swallowing
• Sour-tasting fluid backing up into your mouth
• Coughing a lot and over a long period of time
• Wheezing or hoarseness
• Symptoms that get worse when you eat, bend over, or lie down

Call your doctor right away if you have any of the symptoms listed below. These symptoms could indicate more serious medical problems such as a heart problem or an ulcer:
• Vomiting red blood, or vomit that looks like coffee grounds
• Passing black, tarry, or bloody stools
• Losing weight unexpectedly