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Gastroesophageal Reflux Disease (GERD)

Gastroesophageal reflux occurs when stomach contents flow up the esophagus. It is caused by a failure of the lower esophageal sphincter (a one-way valve) to close properly. Laryngopharyngeal Reflux (LPR) occurs when stomach acid flows backwards into the larynx and pharynx.

SILENT REFLUX can occur without obvious symptoms such as heartburn, sour taste in the mouth or burping of stomach contents. We suspect reflux as a possible cause of:

- Persistent cough, throat clearing, chest tightness, chest pain or choking episodes—especially if this occurs when lying down
- Poorly controlled asthma despite regular medications
- Hoarseness or burning in the throat

There are many lifestyle changes that will improve reflux:

- Eat small, more frequent meals rather than large meals
- Don't eat within 2-3 hours of lying down
- Avoid tight-fitting belts or tight clothes around the abdomen
- Lose weight if overweight
- Don't exercise immediately after eating
- Watch what you eat and drink. The following may trigger GERD:
 - Caffeine
 - Alcohol
 - Carbonated beverages
 - Chocolate
 - Mint
 - Spicy or fried foods
 - Tomato products (eg Spaghetti sauce)
 - Onions
 - Citrus fruit or Citrus fruit juices
- Stop Smoking
- Elevate the head of your bed 4-6 inches by placing books or blocks under the legs at the head of the bed or use a wedge to elevate the mattress. Note: do not use extra pillows as this can increase pressure on your abdomen

Medications that reduce stomach acid, called “proton pump inhibitors” (PPI’s) such as Nexium, Prevacid, Aciphex, Protonix or over-the-counter Prilosec (Omeprazole) can stop acid reflux. These work best if used 30-60 minutes before the evening meal. Sometimes twice daily medication is needed and occasionally surgery is needed.