**Acid Reflux**

**What is acid reflux?**

Acid reflux refers to a condition in which acid from the stomach flows up into the esophagus, causing a burning sensation in the chest that is frequently referred to as “heartburn.”

The esophagus is a tube about ten inches long that begins at the back of the throat. The area at the end where it connects with the stomach is called the lower esophageal sphincter (LES). The LES opens to allow food to pass through to be digested, then it closes to prevent the stomach acids from entering the esophagus. When the LES fails to work properly, digestive acid from the stomach can reflux which means it “flows back,” up into the esophagus.

**Who gets acid reflux and why?**

Acid reflux can affect people of any age but it generally is more common among older adults, particularly those who are overweight or obese, who are pregnant, or who smoke. For others, acid reflux can be triggered by lying down after eating a heavy meal or snacking close to bedtime; eating spicy, fatty or fried foods; drinking alcohol, caffeinated beverages, or citrus juices; eating certain foods, like garlic or chocolate; or taking aspirin, ibuprofen, or certain blood pressure medications or muscle relaxers.

**What are the effects and complications of acid reflux?**

Gastric acids do not typically damage the stomach. However, they are capable of causing great damage to the sensitive cells that line the esophagus. For some people, acid reflux becomes an ongoing, chronic problem, which can lead to gastroesophageal reflux disease, or GERD.

**How is acid reflux diagnosed at the lab?**

A common means of diagnosing acid reflux is with a pH monitor test, which records how much acid washes back into the esophagus during a 24-hour period. This procedure can be done using a thin catheter placed through the nose and down the esophagus or by using a small capsule to measure the pH (or acidity) of the esophageal contents.

In other cases, a healthcare provider will perform an endoscopy to view the damage caused by reflux, such as redness, erosion or ulcerations in the bottom part of the esophagus. During the endoscopy, a small tube with a camera is inserted through the patient’s mouth and into the esophagus, and a small sample (biopsy) of the lining of the esophagus will be taken.

The biopsy will be sent to a lab, where the tissue is processed into thin sections that are prepared on glass slides and examined under the microscope by a pathologist, a doctor specializing in the diagnosis of disease. At Inform Diagnostics, all of the pathologists are subspecialists, such as GI pathologists for conditions of the digestive system. Difficult and unusual cases are reviewed together at a large multi-headed microscope to ensure the most accurate and definitive diagnoses. The pathologist creates a pathology report with all the important findings, including critical information to help guide treatment and assess prognosis, which is sent back to the patient’s healthcare provider.

**How is acid reflux treated?**

Antacid tablets can help with the occasional bout of acid reflux; however, a healthcare provider may recommend a prescription drug called a proton pump inhibitor (PPI)* for patients with persistent symptoms that require more potent control.

*These PPIs should not be taken by people taking certain anticoagulation drugs, and patients should discuss these and other medicines they are taking with their doctor.
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Unlike antacids, which work on the outside of cell tissues, PPIs work on the inside of certain stomach cells. They slow down the acid-producing cells, which then can reduce the irritation to the esophagus and related chest pain.

The length of treatment is based on the amount and severity of the esophageal irritation that was found in the endoscopy procedure.

In addition to over-the-counter or prescribed medications, these tips may help patients with acid reflux:

- sleeping with the head of the bed raised
- losing weight (if patient is overweight or obese)
- avoiding snacks and meals within three hours of going to bed or lying down

Also, since certain foods are known to worsen the condition, people with acid reflux should try to avoid:

- alcohol
- fatty foods and high fat meals
- large meals
- citrus juice
- chocolate
- tomato-based foods
- onions and garlic

Learn more!
These resources provide more information about acid reflux and treatment options.

- www.refluxmd.com
- Tips for reducing acid reflux symptoms without PPIs
- www.healthcentral.com/acid-reflux/video.html
- An animation on how PPIs block acid
- patients.gi.org/topics/acid-reflux/
- American College of Gastroenterology

This material is intended for patient education and information only. It does not constitute advice, nor should it be taken to suggest or replace professional medical care from your healthcare provider. Your treatment options may vary, depending upon medical history and current condition. Only your healthcare provider and you can determine your best option.