

facts about...

HEARTBURN

OESOPHAGEAL REFLUX

What is heartburn?

Heartburn is very common. Almost everyone has it at some time. It is a feeling of discomfort or burning or even pain felt rising up from the lower chest to the neck. Some people call it indigestion. Doctors call it gastro oesophageal reflux disease (GORD) or reflux.

Reflux is due to stomach acid rising up to the oesophagus where it can cause pain and inflammation. Occasionally reflux is associated with food or fluid coming into the mouth. This is called regurgitation.

If reflux symptoms occur regularly, say a few days a week or even every day, they may be distressing and need treatment.

Does my diet cause reflux?

Many people who have reflux have symptoms no matter what they eat. Sometimes, however, the foods we eat can make reflux worse. Problem foods include large meals, fatty foods, chocolate, coffee, alcohol, cigarettes, cola drinks and peppermint. Some people know that a particular food gives them reflux. You should avoid food situations that you know can cause you trouble. For example, don't have a meal just before going to bed or drink a lot of coffee at the end of the

day. People generally do benefit from losing weight if they are overweight.

Do I need any tests?

Reflux disease is a diagnosis based on symptoms and a special test is not usually necessary unless you have alarm features such as weight loss, difficulty or pain with swallowing or vomiting – especially if there is any blood in it.

Reflux is common and doctors know a lot about the cause and how to treat it. If you have any of the alarm features above, or if medication does not give sufficient benefit, you should speak with your doctor about a test called "endoscopy".

At endoscopy, a doctor can inspect the inside of your oesophagus using a flexible tube. Based on this, a change in your treatment may be suggested. Rarely, further tests are needed to check the muscles in the oesophagus or the duration that acid refluxes up from the stomach.

How is reflux treated?

Which treatment depends on how severe your symptoms are. People who have mild or infrequent symptoms often respond to antacids



FOODS WHICH CAN

make heartburn worse include fatty foods, chocolate, coffee, alcohol, cigarettes, cola drinks and peppermint.

which neutralize the acid produced by the stomach. Other people may require drugs that reduce the amount of acid the stomach produces. You can buy some of these medications over the counter on the advice of your pharmacist. To get others you need a prescription from your doctor. Treatment is very effective and safe.

Will I need to take medicine forever?

Unfortunately most people who have reflux symptoms continue to have trouble if they don't

take medication. However, you may not need to take your medication every day. Many patients are able to take their treatment on an "as required" basis. If you think this would suit you best, discuss it with your doctor.

Are there surgical options for treating reflux?

A small percentage of people require surgery for control of their reflux disease. The surgery is performed through a "key-hole" approach called laparoscopy. Surgery is usually reserved for patients who have severe symptoms or those whose symptoms are not relieved adequately with medication alone or those do not want to take medications long-term.

Key Points

- " Heartburn is very common "
- " Doctors know a lot about the cause and how to treat it "
- "Treatment is very effective and safe."

This information booklet has been designed by the Digestive Health Foundation as an aid to people who have heartburn or for those who wish to know more about it. This is not meant to replace personal advice from your medical practitioner.

The Digestive Health Foundation (DHF) is an educational body committed to promoting better health for all Australians by promoting education and community health programs related to the digestive system.

The DHF is the educational arm of the Gastroenterological Society of Australia, the professional body representing the Specialty of gastrointestinal and liver disease in Australia. Members of the Society are drawn from physicians, surgeons, scientists and other medical specialties with an interest in GI disorders.

Since its establishment in 1990 the DHF has been involved in the development of programs to improve community awareness and the understanding of digestive diseases.

Research and education into gastrointestinal disease are essential to contain the effects of these disorders on all Australians.

Further information on a wide variety of gastrointestinal conditions is available on our website.

