

Gastroesophageal Reflux Disease

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Description

Gastroesophageal Reflux Disease (GERD) occurs when stomach acid frequently regurgitates into the tube that connects the mouth to the stomach (esophagus). This reflux (acid reflux) can irritate the lining of the esophagus. The most common problem with the esophagus is Gastroesophageal Reflux Disease (GERD), allows stomach contents to blunder back, or influx, into the oesophagus and irritate it. Over time, GERD can bring damage to the esophagus. One common cause of acid reflux disease is a stomach abnormality called a hiatal hernia. This occurs when the upper part of the stomach and LES move above the diaphragm, a muscle that separates your stomach from your chest. Normally, the diaphragm helps keep acid in our stomach. But if you have a hiatal hernia, acid can move over into your esophagus and cause symptoms of acid reflux disease. Elderly cases constantly do not present with the classic symptoms of heartburn and acid regurgitation, which can delay opinion and contribute to the development of complications. Atypical symptoms likewise as casket pain, pulmonary, and laryngeal symptoms are more common in this group, and influx should be considered beforehand in the work-up if these symptoms are present. Due to an increase in complications of influx complaint in this population, maximum elderly cases being estimated for reflux symptoms should have an upper endoscopy beforehand in the individual process.

The below are other common peril factors for esophagus reflux disease,

- Eating large amount of food or lying down right after a meal
- Being fat or fat
 - Eating a heavy meal and lying on your reverse or bending over at the waist
 - Snacking close to bedtime
 - Eating certain foods, likewise as citrus, tomato, chocolate, mint, garlic, onions, or spicy or oil foods
 - Drinking certain drinks, likewise as alcohol, carbonated drinks, coffee, or tea
 - Smoking
 - Being pregnant
 - Taking aspirin, ibuprofen, certain muscle relaxers, or blood pressure medicines

There are several symptoms that could indicate the presence of GERD like,

- Aspiration, when food rises through the esophagus and returns down the trachea
- Habitual hoarseness or cough
- Dental problems
- Difficulty swallowing (performing from scarring)
- Frequent heartburn
- Regurgitation of food, especially at night

Anyone can get gastroesophageal influx complaint, but the troubles are increased in people who are fat, have a hiatal hernia, live with a connective tissue disorder and women who are pregnant can also feel GERD during their gestation. Life choices are another peril factor in developing GERD like eating large meals late at night, extreme drinking of alcohol or coffee and smoking. Numerous people with GERD find that certain foods spark their GERD symptoms, likewise as fried, oily or spicy foods. However, simple dietary changes may be enough to control your GERD symptoms, if acid influx is mild and flares up only in response to specific foods.

The main symptom of GERD is acid reflux. Acid reflux can produce an uncomfortable burning feeling in your chest, which can move over into your neck and throat. This feeling is constantly known as heartburn. Indeed you might feel like a sour or bitter taste at the reverse of your mouth, if you have acid reflux. It might also beget the regurgitation of food or liquid from your stomach into your mouth.

Some other symptoms of GERD include

- nausea
- chest pain
- pain when swallowing
- difficulty swallowing
- habitual cough

GERD treatment aims to cut down on the amount of reflux or lessen damage to the lining of the esophagus from refluxed materials. Doctor may recommend prescription drugs to treat the symptoms.

Antacids

These drugs help neutralize the acid in the esophagus and stomach and stop heartburn. Many people find that non-prescription antacids provide temporary or partial relief. The combination of antacids and foaming agents helps some people. Researchers believe that these compounds create a foamy barrier in the stomach and stop acid reflux. However, long-term use of antacids can cause side effects such as diarrhoea, changes in calcium metabolism (degradation of the body and changes in the way calcium is used), and magnesium accumulation in the body. Too much magnesium can be serious for people with kidney disease. Talk to your doctor if you need antacids for more than 2 weeks.

H2 blockers

For chronic reflux and heartburn, doctors may recommend medication to reduce stomach acid. These drugs include H2 blockers that help block acid secretion in the stomach. H2

blockers include Cimetidine (Tagamet), Famotidine (Pepcid) and Nizatidine.

Proton Pump Inhibitors (PPIs)

These drugs, also known as acid pumps block the proteins needed to make stomach acid. PPIs include Dexilant, Nexium, Lansoprazole (Prevacid), Omeprazole (Prilosec), Omeprazole/Sodium bicarbonate (Zegerid), Pantoprazole (Protonix), and Rabeprazole (Aciphex).

Prokinetics

In rare cases, these drugs help the stomach empty quickly and leave less acid. It is also effective for symptoms such as abdominal distension, nausea and vomiting. However, they can also cause serious side effects. Many people cannot take them, and those who can take them should take them for a limited time. Examples of prokinetics are domperidone and metoclopramide (Clopra, Maxolon, Metozolv, Reglan).