

HEARTBURN

Written by U.S Immigration News
Thursday, 18 July 2013 23:11 -



Heartburn is the feeling of burning sensation or pain behind or just below the breastbone (sternum) caused by the backing up (reflux) of stomach acid into the food pipe (esophagus). Interestingly, it has nothing to do with the heart as the name suggests. About ten percent of Americans experience heartburn. It can be triggered by certain foods, lifestyle, medications and even stress. Mainstay of treatment includes avoiding foods that trigger the symptoms and use of antacids. Recurrent heartburn is the commonest symptom of Gastro-esophageal reflux disease-GERD (backing up of stomach contents into the food pipe).

How does heartburn feels?

- Sensation described as warm, burning, peppery or pain starting from below or behind the breastbone. The symptoms may worsen after eating or lying down.
 - Other symptoms which may overlap with that of GERD include bloating, feeling of indigestion, and burping
 - If the acid gets high enough into the throat, may cause sour taste in the mouth.
- Frequent heartburn causes irritation in the esophagus and throat may cause chronic cough and worsen asthma attacks.

When heart burn occurs frequently, not easily relieved by antacids or has been present for a long time, medical advice should be sought.

What causes heartburn?

The food pipe is connected to the stomach by a circular band of muscle called the gastro-esophageal sphincter. It acts like a valve between the food pipe and the stomach. It relaxes upon swallowing to allow normal passage of food into the stomach and then closes back. If the sphincter is weak or relaxes abnormally, it allows acid to flow back (reflux) into the food pipe. The lining of the food pipe is not accustomed to the degree of acidity from the stomach, causing irritation which is felt as the symptoms earlier described.

Certain things which worsen heartburn include:

- Foods: chocolate, spicy food, tomato sauce, caffeine, onions and carbonated beverages (for example soda). Eating large meals and lying down soon after eating.
- Alcohol and cigarette smoking
- Medications: antidepressants, certain blood pressure medication (calcium channel blockers) and sleep medicines.

What increases my chances of heartburn?

- Obesity: people who have obese increase the pressure on the stomach which can force stomach content back into the esophagus.
- Eating large amount of food
- Pregnancy: weakens the gastro-esophageal sphincter because of high progesterone hormone, coupled with the increased pressure
- Anything that delays stomach emptying: the longer food takes in the stomach, the higher the chance of reflux into the esophagus. Some of the things that delay emptying include Diabetes, nerve damage, blockage to the outlet from the stomach and medications.
- Diseases that affect muscle thickening and relaxation such as Scleroderma
- Anything that weakens the sphincter for example when part of the stomach wall protrudes into the chest (hiatus hernia).

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How is heartburn diagnosed?

History of the symptoms is enough to make diagnosis

X Ray: Upper gastrointestinal series involves drinking a whitish material called barium which outlines the esophagus and stomach. Reflux can be observed during the procedure

Upper endoscopy: an endoscope (a small tube passed through the mouth) can be used to visualize the esophagus and stomach by a specialist.

Testing the acidity: a probe is passed via the nose to monitor the pH (acidity) of the esophageal content

Direct measurement of the pressure of the lower esophageal sphincter: using a pressure sensor passed through the mouth, you can record the pressure of the sphincter.

How is heartburn treated?

Antacids: Neutralize the acidity of the stomach and act quickly. To name a few are Maalox, Roloids, Tums and Gelusil.

Medications that decrease acid production (H₂- blockers): many are over the counter such as zantac, pepcid, tagamet, acid. Some are also available at stronger strengths at higher doses.

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Medications that block acid production: blocking acid production allows time for healing.

When should I worry about heartburn?

As simple as heartburn may seem, certain situations can be cause for concern. Complications can also arise from a seemingly simple condition.

- Frequent and prolonged heartburn
- Heartburn not responding to usual treatment
- Heartburn occurring at a late age
- Weight loss
- Heartburn associated with discomfort or difficulty swallowing

What can I do to help myself?

Avoid eating late and don't lie down immediately after food. Eat small meals and avoid foods that give you heartburn. You can also raise the head of the bed by about six to nine inches. Sodium bicarbonate added to water has been used as home remedy by some people. This only provides temporary relief.

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Take home message

Changing your life style is one of the easiest ways of preventing heartburn. If heartburn persists seek medical advice, especially if you are a smoker.

Dr. Oluwatoyosi Dairo can be contacted at **Amazing Medical Services, 110-16 Sutphin Blvd, Jamaica NY 11435 or by phone at (718) 526 7600.**

The health columns are for educational purposes only and are not intended to replace the advice of your doctor.