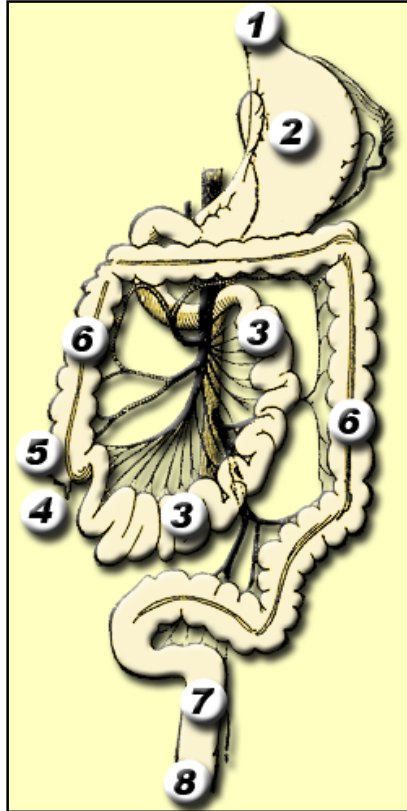


Reflux / Heart Burn / GERD

Commonly referred to as heartburn, gastro-intestinal-reflux disease or GERD, is a chronic condition caused by the backflow of acid, bile, enzymes, and food into the esophagus.



Virtually everyone has experienced at least the occasional discomfort in the chest or throat and the sour taste in the mouth caused by this reflux process. Overeating, consuming certain types of foods and beverages, and lying down too soon after eating can trigger reflux.

Often reflux occurs because the valve between the lower end of the esophagus and the stomach—called the lower esophageal sphincter—fails to close properly, allowing the stomach's contents to be regurgitated into the esophagus and throat.

When these symptoms occur many times a week and become difficult to control, they are diagnosed as GERD.

The real danger of reflux is, that over time, refluxed stomach acid, left to continue, can erode or cause ulcerations in the lining of the esophagus. Some sufferers develop scar tissue, which narrows the esophagus and can make swallowing food difficult.

1 = Lower Esophageal Sphincter (LES)
2 = Stomach Cavity

Several factors can contribute to an individual's susceptibility to developing the symptoms of GERD. Some people, for example, develop heartburn whenever they eat spicy foods. Others seem to be able to tolerate any kind of food without developing heartburn.

Tobacco and alcohol use can increase the tendency to develop reflux symptoms, as can being overweight. A genetic component may also be involved in this condition.

Extra body weight increases the pressure on your stomach. When you have a roll of fat tissue on your abdomen, it pushes down on your abdominal contents in a similar way, applying pressure to the lower esophageal sphincter. As a result of this pressure, the lower esophageal sphincter is no longer able to perform its job of keeping the stomach contents from escaping into the esophagus. As it opens, partially digested foods and stomach acid are pushed up from the stomach to the esophagus, leading to the symptoms of GERD.

In the Western medical system, GERD is often treated with over the counter treatments like antacids, which are simple mineral salts that neutralize stomach acid or H2 blockers that block the action of histamine, which stimulates stomach acid secretion. A third line of treatment entails the use of proton-pump inhibitors (PPIs). These medications block the secretion of digestive acids by the proton pumps in the stomach's lining, hence the name 'proton pump inhibitors.' PPIs, anti-acids and H2 blockers are not without their drawbacks, however.

They can often bring rapid recovery to uncomfortable symptoms, but act as a band-aid, ultimately making symptoms worse. Use of antacids or 'acid-production inhibitors' tricks our body into thinking it is lacking stomach acid. Our bodies overreact and may produce large amounts of a hormone called gastrin, which stimulates stomach acid production. When you try to stop taking these meds your stomach continues to make large amounts of acid.

Tierona Low-Dog, MD, a well-known speaker, herbalist, and integrative physician, outlines the negative side of PPIs. She says that reducing stomach acid raises risk for both nutrient deficiencies and food-

borne illness, that it is very hard to get off the PPIs as acid production can double when discontinued, and that the use of PPIs has been shown to increase the risk of hip fractures. She also points out the many nutrients that are not well absorbed in a low stomach acid environment; calcium and B-12 are two examples.

Dietary and Lifestyle Modifications: Important In Managing GERD

- Maintain reasonable weight.
- Avoid tomatoes, garlic, onions, chocolate, peppermint, citrus, oils, fats and spicy foods (if they bother you).
- Eat 4-6 *small meals* a day. Last meal should be 3-4 hours before bedtime.
- Large and late evening meals are especially problematic.
- Never lie down after eating, try a walk after dinner to move digestion along.
- Elevate the head of the bed on blocks 4-6 inches. Sleeping on the left side also keeps gravity working for you, keeping your stomach below your esophagus.
- Get rest (see melatonin below) and exercise.
- Avoid smoking, as it contributes to GERD
- Check all your other medications. Use of Aspirin, ibuprofen, and NSAIDS and many other prescription meds loosens the lower esophageal sphincter, allowing the stomach acids to enter the esophagus.
- Alcohol consumption, even with meals is a trigger. Wine with dinner? Maybe not on a daily basis.
- Drink as little liquid as possible with meals as large amounts of liquid dilute digestive juices.
- An alkalizing diet of vegetables and fruits keeps our pH in check, preventing us from becoming overly acidic.

Natural Alternatives for Healing Heartburn

- **Antioxidants** can prevent esophageal inflammation and lower the risk of associated esophageal cancer with reflux.
- Try a high potency, high quality **Digestive Enzyme** supplement containing protease, amylase, and lipase, before and after meals, to aid in digestion of foods. Again, eating an alkalizing diet of vegetables and fruits keeps our pH in check.
- Try **Melatonin caps**, 30 minutes before sleep, if you feel sleep deprivation is your issue. A strong relationship exists between sleep, nighttime production of melatonin and the production of acid in the stomach, as research studies have shown. These studies used 3 mg of a plant-based melatonin. Five research articles have been published in peer reviewed medical journals suggesting a relationship between the hormone melatonin and GERD. A strong relationship is known to exist between nighttime production of melatonin, sleep and the production of acid in the stomach. Melatonin is known to inhibit gastric acid secretion and the making of nitric oxide (NO). NO acts to temporarily relax the lower esophageal sphincter, allowing any acid in the stomach to seep upwards while sleeping.
- Tierona Low-Dog, MD recommends trying **Chewable DGL Licorice Root Extract** for an irritated gut. It has been shown to prevent reflux and to support the lining of the stomach and the intestinal tract.

- Try using a small amount of **Braggs Apple Cider Vinegar** (the ACV with the 'mother' in the bottle) in a small amount of water 10 minutes following each meal. ACV provides acid, which tells the stomach in a "feedback loop" to stop over-producing more acid of its own. Another OLD FOLK REMEDY calls for 2 or 3 teaspoons (10-15 ml) in an 8-ounce glass of water, before meals or whenever heartburn is experienced. Low-Dog also recommends the use of digestive bitters, a very old European tradition. To prime the digestive system and improve digestion, she recommends mixing one tablespoon of **Angostura or Swedish bitters** with a small glass of seltzer 15–20 minutes before dinner.
- For soothing gut irritation try drinking about 5 ounces of **Aloe Vera Juice** diluted with water between meals. To reduce inflammation in the gastrointestinal tract, take anti-inflammatory essential fatty acids like **Omega-3s**.

Natural alternatives may help reduce your need for medications if you develop full-blown GERD and control the discomfort of occasional acid reflux. Making changes in diet, eating routines, other lifestyle changes along with the suggestions above may make a big difference in how you feel.

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