

GERD: The Must to Know

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Gastro-esophageal reflux disease, commonly referred to as GERD, is a common condition in which the content of the stomach refluxes (backs up) into the esophagus and could reach the pharynx in severe cases. As this content contains acid and pepsin (produced by the stomach), and sometimes bile (secreted from the liver and backed-up into the stomach from the duodenum), this liquid content can damage the lining of the esophagus, causing various degrees of inflammation (esophagitis). Although this inflammation process occurs in a minority of patients, but could be enough to make them mildly to severely symptomatic and progresses to the complications.

The causes of GERD include a dysfunctional lower esophageal sphincter, hiatal hernia, abnormal esophageal motility, and slow emptying of the stomach.

Symptoms of uncomplicated GERD include mainly:

1. Heartburn (discomfort, pain)
2. Regurgitation,
3. Nausea.

Complications of GERD include:

1. Esophageal Ulcers, Strictures, and Barrett's Esophagus*
2. Respiratory infections (throat, larynx, sinuses, ears and lungs) and asthmatic attacks.

*Barrett's esophagus (occurs in ~ 10 - 20%) is a pre-cancerous condition that requires periodic endoscopic surveillance for the development of cancer.

GERD usually diagnosed and evaluated by a trial of treatment, upper endoscopy +/- biopsy, X-ray studies, 24 hour esophageal acid monitoring, esophageal motility testing, emptying studies of the stomach, and esophageal acid perfusion test.

GERD is treated with multi-therapeutic protocol, the life-style changes are the must and most important, in addition to antacids, histamine antagonists (H₂ blockers), proton pump inhibitors (PPIs), pro-motility drugs, foam barriers, endoscopic procedures and finally the surgery.

At last, GERD is a manageable disease by awareness of its causes and symptoms to be treated as early as possible.

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