

ACP SPECIAL REPORT

Understanding and Treating Heartburn



What is Heartburn?



It begins as a burning pain in the middle of your chest, behind the breastbone, often after a big meal. The burning sensation might move upward toward your neck and is often accompanied by a feeling of food coming back into your mouth.

If you occasionally experience heartburn, you're not alone. About 40 percent of adults in the United States have heartburn at least monthly.

Also called acid indigestion, heartburn is caused when stomach acid backs up into the esophagus due to a weak or improperly relaxed sphincter muscle in the lower esophagus. While occasional heartburn usually isn't serious, recurrent episodes can be a symptom of gastroesophageal reflux disease, or GERD.

Talk to your doctor; frequent heartburn may lead to a more serious condition called gastroesophageal reflux disease, or GERD. Use this guide and go to www.acg.gi.org and www.niddk.nih.gov to learn more about heartburn.

What Are the Symptoms?	<i>page 3</i>
What Do You Have?	<i>page 4</i>
Heartburn Myths and Facts	<i>page 5</i>
Treating Heartburn	<i>page 6</i>
Medications for Heartburn	<i>page 7</i>
Doctors for Adults	<i>back cover</i>

This ACP Special Report on heartburn is made possible by the American College of Physicians.

www.acponline.org
1-800-523-1546



©2004 The StayWell Company
407 Norwalk St., Greensboro, NC 27407
www.StayWell.com All rights reserved.

What are the **SYMPTOMS?**

Learn the **Burn**

Heartburn symptoms can be brought on by a variety of foods and conditions.

What Does It Feel Like?

The most common description of heartburn is a burning sensation in the middle of your chest, usually soon after eating. You may also have a bitter or acid taste in your mouth and feel an increase in pain when you lie down or bend over.

What Can Cause It?

Certain foods and beverages can cause the lower esophageal sphincter (LES) to relax when it shouldn't and allow stomach acid to enter your esophagus. These include:

- Alcohol
- Coffee
- Fried or fatty foods
- Spicy or acidic foods
- Onions
- Chocolate
- Mint
- Caffeine

Some medications can also make you more susceptible to heartburn, including

bisphosphonates, iron salts, potassium salts, and certain pain medications and antibiotics. Other factors that increase the risk of heartburn are:

- **Obesity:** Pressure on the stomach and diaphragm from excess weight can cause the LES to open and allow stomach acid into your esophagus.
- **Pregnancy:** Greater abdominal pressure during pregnancy and an increase in progesterone can cause the LES to relax.
- **Hiatus hernia:** The protrusion of part of the stomach through the diaphragm can weaken the LES.





Making the Right Decision

Occasional heartburn is common and usually not serious.

Controlling Heartburn

Most problems with heartburn are brief and mild. Because it is fairly common, a description of your symptoms is usually all your doctor needs to make a diagnosis. Lifestyle changes are generally all that are needed to control heartburn (see page 6).

In some cases heartburn could be a symptom of a more serious condition called gastroesophageal reflux disease (GERD). It is important to remember, though, that occasional, or episodic, heartburn doesn't necessarily mean you have GERD.

Episodic vs. Frequent Heartburn

Episodic heartburn is common. These bouts are usually mild and infrequent, and are easily managed with lifestyle changes and over-the-counter treatments such as antacids and over-the-counter or prescription H₂ blockers. The H₂ blockers partially block production of acid in the stomach.

Frequent heartburn occurs two or more times a week and, in conjunction with lifestyle changes, can be treated with H₂ blockers or proton pump inhibitors (PPIs). PPIs are available over the counter and by prescription. PPIs suppress the acid where it is made in the stomach by blocking the chemical mechanism that produces the acid.

Heartburn or Heart Attack?

The pain you experience during a severe bout of heartburn can feel similar to the pain from heart disease, either a heart attack or angina. It often takes an examination by a doctor to determine the cause of the pain. Some possible differences between heartburn symptoms and symptoms of heart disease are:

Heartburn

- A sharp, burning pain that usually comes soon after meals
- Pain that usually doesn't, but can, radiate to the neck, shoulders or arms
- Pain that is quickly relieved by taking liquid antacids

Heart Attack or Angina

- A tight or full feeling, dull or crushing pressure, or pain in the center of the chest
- Often occurs with activity or exertion
- Pain may spread to the shoulders, neck, arms or jaw
- Often accompanied by a cold sweat, shortness of breath, nausea or vomiting

When in doubt, however, it is best to seek immediate medical attention.

Suffering in Silence?

**You don't have
to learn to live
with heartburn.**

Myth: Heartburn is something I have to live with.

Fact: Some over-the-counter medications can actually prevent heartburn in addition to providing relief from its symptoms. H2 blockers and proton pump inhibitors effectively suppress acid production.

Myth: Heartburn is something I can't control.

Fact: You don't have to suffer in silence. Lifestyle and diet changes and over-the-counter or prescription medications provide relief for most heartburn sufferers.

Myth: Heartburn is a minor complaint.

Fact: Heartburn is common but not trivial. Persistent heartburn could be a symptom of GERD, which, left untreated, can cause complications that need medical attention.

Myth: Antacids are not real medicine.

Fact: Just because antacids are sold without a prescription doesn't mean that they're not real medicine. In fact, you should be sure to read and follow the directions on the package before using them or any drugs. Frequent use of antacids, however, can cause diarrhea or constipation.

Myth: If I take a drug to suppress acid, I won't be able to digest my food.

Fact: Acid works together with other substances in the stomach called enzymes to digest food. Acid-suppression drugs allow enough acid to be produced to digest food normally.



What Can Be Done?

Heartburn sufferers can often get relief through lifestyle and dietary changes.

Lifestyle Changes

Following these tips can help you stop heartburn or prevent it from recurring:

- Elevate the head of your bed 4 to 6 inches to prevent acid from creeping up into the esophagus while you sleep.
- Avoid lying down for three hours after eating a meal.
- Stop smoking. Smoking inhibits the body's production of protective saliva in the esophagus and also may trigger the production of acid.
- Lose excess weight.

- Sleep on your left side.
- Wait a while after you eat before exercising.

A Better Diet

Watching what and how you eat can help reduce your heartburn:

- Eat smaller meals, and eat more slowly.
- Avoid foods that trigger symptoms and may irritate the esophagus, such as chocolate, peppermint, onions, garlic, citrus juices, acidic and tomato-based foods, and fatty foods.
- Avoid alcoholic, caffeinated and carbonated drinks.

When More Help Is Needed

If lifestyle and diet modification strategies fail, a drug that reduces production of stomach acid may be prescribed (see page 7).

If you have heartburn two or more times a week, talk to your doctor. In most cases, heartburn will disappear with treatment. If not, your doctor may recommend tests to determine the cause of your symptoms and rule out other conditions.

In severe cases in which GERD is present and medications do not control the symptoms, surgery may be necessary to tighten the lower esophageal sphincter muscle. If a hiatus hernia is present, surgery is sometimes used to restore the stomach to its normal position.



Neutralizing the Problem

When lifestyle changes fail to work, medicines provide the key to relief.

Strong Acid

The harsh digestive juices that flow backward into the esophagus causing heartburn contain hydrochloric acid, which is normal in the stomach, but causes inflammation when it backs up into the esophagus.

Tiny pumps in the stomach's lining produce the acid, and heartburn remedies are designed to work in a variety of ways to alleviate the symptoms.

Antacids

Antacids are used to treat mild or occasional acid indigestion and heartburn symptoms, relieving the discomfort by partially neutralizing excess stomach acid. They provide rapid but short-term relief lasting up to two hours. Antacids, available over the counter, may cause diarrhea or constipation. If heartburn or indigestion persists for more than a week, see your doctor.

Acid Suppressors

H2 Blockers

H2 blockers suppress acid by turning off one of the three signals that activate the



If heartburn or indigestion persists for more than a week, see your doctor.

acid pumps in the stomach, blocking the release of a portion of the pump's acid. H2 blockers are available over the counter and by prescription. Some may have unfavorable interactions with other drugs.

Proton Pump Inhibitors

Proton pump inhibitors (PPIs) reduce stomach acid by suppressing the acid pumps in the stomach, but normal digestion of food can still take place. PPIs are available over the counter and by prescription.

What is the American College of Physicians?

The American College of Physicians (ACP) is the largest medical specialty society and second-largest physician group in the United States. Its membership includes more than 115,000 internal medicine physicians, related subspecialists, and medical students. Internists treat the majority of adults in the United States. ACP's mission is to enhance the quality and effectiveness of health care by fostering excellence and professionalism in the practice of medicine.

What is a doctor of internal medicine?

Doctors of internal medicine, often called “internists,” focus on adult medicine. They care for their patients for life—from the teen years through old age. Internists have had special training that focuses on the prevention and treatment of adult diseases. At least three of their seven or more years of training are dedicated to learning how to prevent, diagnose and treat diseases that affect adults. Some internists take additional training to “subspecialize” in one of 13 areas of internal medicine, such as cardiology or geriatrics. Internists are often called upon to act as consultants to other physicians to help solve puzzling diagnostic problems.



What's an “FACP”?

The letters “FACP” after a physician's name mean he or she is a Fellow of the American College of Physicians, a mark of distinction for an internist. ACP Fellowship is an honorary designation that recognizes service and contributions to the practice of medicine—it says that the doctor is committed to providing the best health care possible.

Why choose an internist for your health care?

An internist, just like a family practice or general practice doctor, can serve as your primary care doctor. But internists are unique because they focus on adult medicine. Internists don't deliver babies, they don't treat children and they don't do surgery. They do, however, have wide-ranging knowledge of complex diseases that affect adults. With in-depth training in adult medicine, an internist is your best choice to help you navigate the increasingly complex world of medical care.

An internist can treat you for something as routine as the flu, or provide in-depth care for diseases such as diabetes, cancer or heart disease. Internists often coordinate the many subspecialists a patient might see in the process of treating an illness. Internists' patients like knowing that they have a relationship with a physician who is equipped to deal with whatever problem the patient brings—no matter how common or rare, or how simple or complex.

For more information about internists and internal medicine, visit www.doctorsforadults.com.

This Special Report courtesy of:

ACP
AMERICAN COLLEGE OF PHYSICIANS
INTERNAL MEDICINE | *Doctors for Adults*