

Acid Reflux

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This is a backflow of stomach acid into the esophagus and may occur during the day or while sleeping. The medical diagnosis is called gastro-esophageal reflux disease or GERD. It is becoming epidemic in our western world. Unfortunately, the current medical myth is that GERD is caused by overproduction of stomach acid (HCL). More often the person's parietal cells are not being signaled to secrete enough HCL for efficient digestion. When HCL production is too low, food ferments and putrefies in the stomach creating combustion from the body's heat. The problem is not too much acid, but that stomach contents rises up from the stomach into the esophagus.

Taking drugs like Tums, Roloids, Alka Seltzer, Maalox, Mylanta, Duracid, Tempo, Gelusil, Gaviscon, Amphojel, or Riopan to suppress HCL production may give temporary relief but cause lasting damage to our stomach. Please remember that there is a multi-billion dollar industry in prescriptions such as Prilosec, Prevacid, AcipHex, Nexium, Protonix and Propulsid (taken off the market after it was found to cause heart failure)!

If we stop the production of HCL, we lose nature's most effective, self-producing "antibiotic" and the capability to defend ourselves from bacteria in foods we ingest, especially raw foods like sushi. This is also a common cause of parasite infestation. It also may lead to ulcers. The offending bacteria, called h. pylori takes over and erodes the lining of the stomach. We have outlined the condition and what you can do about it to avoid the progression of this disease to cancer of the esophagus.

My dear father lived on Roloids and Tums during his lifetime. As a child, I can remember stealing them from his coat pockets thinking they were peppermint candy. Eventually, he developed cancer and was unable to swallow as a result of a tumor at the end of his esophagus where it meets the stomach. He was unable to sit up straight due to the discomfort. During his last days, all he could eat was soup. I dedicate this article to the memory I carry of his outstanding courage in the face of death.

Symptoms

- Heartburn (most common symptom)
- Uncomfortable, rising, burning sensation behind breast bone

- Difficult and/or painful swallowing
- Chest pain
- Regurgitation of gastric contents into the mouth
 - Can cause sore throat
 - Dissolve enamel of the teeth
- Occurs after eating
- Pulmonary manifestations
 - Asthma or Coughing
 - Intermittent wheezing (acid being regurgitated into the lungs)
 - Vocal cord inflammation with hoarseness
- Frequency leads to severe problems
 - Impacts all aspects of a person's life
 - Causes damage to esophagus
 - Cell changes lead to esophageal cancer/tumors that are fatal
- Other names
 - Reflux disease
 - Reflux esophagitis – erosion of the lining
 - Hiatus hernia
 - This is a specific diagnosis and is often linked with GERD

Cause

- Due to the relaxation of the sphincter at the lower end of the esophagus that keeps the sphincter closed when the person is not swallowing food or liquid.
 - Occurs naturally several times in a day in people without GERD
- A definitive cause has not been determined.
- Triggers
 - Stress
 - Stress management and relaxation exercises are vital
 - Meals
 - Low acid production
 - Overeating-stomach does not empty well, creates upward pressure
 - Caffeine, chocolate, alcohol, smoking (swallowing nicotine)
 - Lying down after a meal
 - Medication
 - Delays emptying stomach contents
 - Lithium
 - Possible link to mood altering drugs
 - Tight clothing-especially around the waist and bustline
 - Bending over after meals
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 - Pregnancy

Estimated by the Dept. of Health and human services the 7 million in the US

suffer from GERD

- Afflicts every socioeconomic class, ethnic group & age
- Average age group affected is 45 – 64, male and female
- Some cases of children and infants have been reported
- Hiatus hernia is the dislocation of the stomach through the diaphragm & into the chest and often gives same symptoms as GERD. This is a mechanical malfunction whereas GERD is a chemical malfunction.

Endoscopy

- Diagnostic test
- Flexible tube
- Swallowed by patient
- Allows doctor to inspect the lining of the upper GI tract
- Used to identify complications of GERD
- Able to biopsy tissue

Complications of GERD

- More cases of are being reported of severe complications
- Esophageal erosions – breaks in the lining
- Esophageal ulcer
- Esophageal Stricture – narrowing
- Barrett's esophagus – replacement of normal lining or epithelium with abnormal
 - Esophagus lining becomes more like stomach or intestine lining as the body attempts to protect itself from further damage
 - Linked with cancer
 - Must be carefully monitored
- Lung aspiration
- Asthma
- Inflammation of vocal cords and throat

Treatment

- Considered incurable at this time.
- Standard medical treatment is to prescribe drugs mentioned above, either acid neutralizers or acid suppressors. These give short-term relief and often cause long-term damage to digestive function. May cause the very symptoms prescribed to treat.
- In severe cases surgery is an option
 - Does not cure the underlying problem
 - Wraps stomach around the lower end of the esophagus to prevent acid from getting up into the esophagus. Most often unsuccessful.

- Colon hydrotherapy has helped many of the symptoms reduce or disappear
- Supplements of HCL/Pepsin often best course of action, reduces putrefaction

Ideas for remedies

- Raise head of bed about 4-8 inches and sleep on your left side.
- Chew each bite a minimum of 25-32 times, one chew per tooth.
- Take one HCL/Pepsin supplement before meals, increase until a burning sensation develops and then back off to previous dosage. We suggest METAGEST.

(Call 970 708 3787 to order. 90 tablets= \$15 or 270 tablets=\$40 plus shipping.)

- Take a good essential fatty acid supplement with omega 3-6-9 up to 1,000 mg./day
 - Avoid stooping and constricting pressure on the abdomen, wear loose clothing Avoid foods that weaken the LES
 - Caffeine, chocolate, peppermint, fatty foods, dairy, alcohol, black pepper, citrus, vinegar, tomato products, yellow onions, sugar, carbonated beverages
 - Smaller meal portions more often throughout the day
 - Eat at least 3 hours before bed. The earlier the better.
 - Stop smoking NOW, swallowing nicotine irritates stomach lining/upsets digestion
 - Drink fresh vegetable juices like spinach with celery and a little carrot Avoid all cold liquids, drink at room temperature or warmer
 - Enjoy herb teas that soothe the digestive tract like slippery elm & fennel Drink 4-6 oz. Filtered/spring water every 30-45 minutes, not during or after meals
 - Manage stress, anxiety and systemic health problems. Find out what is "eating at you." Get regular counseling to develop resources and coping skills.
 - Try acupuncture, massage and biofeedback for stress reduction
- Herbs
- Marshmallow coats and soothes throat/GI tract
 - Chew slippery elm throat lozenges-very healing to throat & GI lining Calendula, chamomile & lemon balm – anti-inflammatory
 - Fennel tea-reduces gas, aids in digestion+ Drink 5-6 oz. Liquid Aloe vera juice between meals (George's brand)
 - Chew deglycyrrhizinated licorice (DGL) between meals as tolerated. Regular colonics – two or three in a row, once per month minimum

This reduces the upward pressure to the stomach by keeping the lower bowel flowing.

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