

ADVANCE FOR
NURSES | PATIENT HANDOUT

Stop the Burning

Changes in eating and medicines help with heartburn for most people, but not all BY STACEY MILLER



At the end of a long day, there's nothing like going home, eating a good meal and settling in on the sofa or chair to relax. But for some people, the evening includes an uncomfortable burning below their breastbone. Often, this is heartburn.

Heartburn affects the stomach and digestive system, not the heart, as its name would suggest. Heartburn usually occurs after eating and is caused when acid or other stomach contents back up in your throat, known as the esophagus.

Although heartburn is common — affecting about one in five Americans — it is hardly ever dangerous to a person's health, but can limit an individual's activities. Most people find relief by knowing the causes of heartburn, using medicines that can be bought at a store without a prescription from the doctor and changing what foods they eat.

Taking Control

A muscle, named the lower esophageal sphincter, is located between the esophagus and the stomach. It can cause heartburn when it doesn't work the right way. This muscle opens after swallowing, allows food to pass to the stomach then closes quickly.

Heartburn happens when the muscle doesn't close fast enough because it's weak or irritated, allowing food and stomach juices to move back up to the esophagus.

Heartburn can be controlled by not eating food and drinks that can stop the muscle from working the right way or irritate the esophagus' lining. Eating fried or fatty foods, chocolate, peppermint, alcoholic and caffeinated beverages, tomatoes, and condiments like ketchup, mustard and vinegar can make heartburn worse.

People who get heartburn should eat less and eat meals 2-3 hours before lying down. If someone must lie down, propping the head of the bed up 4-6 inches can stop stomach acids from going into the esophagus.

To reduce symptoms, you can buy some medicines at stores without a prescription from your doctor. Antacids, such as Maalox, Mylanta, Rolaids and Tums, balance out stomach acid and provide quick relief. Cimetidine (Tagamet HB), famotidine (Pepcid AC), nizatidine (Axid AR) or ranitidine (Zantac 75), called H₂-receptor blockers, are taken about 30 minutes before a meal to balance out stomach

acids. Proton-pump inhibitors like omeprazole (Prilosec) block acid production and help heal damaged tissue in the esophagus.

A small number of people with heartburn who have a poor response to medical treatment may have a surgical procedure called fundoplication that reduces stomach acids moving into the throat. Patients not wanting to take medication to control their symptoms also might find surgery helpful.

What About GERD?

Regular and constant heartburn may be a symptom of gastroesophageal reflux disease (GERD), which usually requires medication or treatment prescribed by a doctor and sometimes surgery.

In addition to heartburn, symptoms of GERD usually include a constant sore throat, hoarseness, a cough that won't go away, asthma, heart-like chest pain and a feeling of a lump in the throat. When the acid contents from the stomach regularly back up into the esophagus, constant GERD can occur.

Long-term GERD can lead to Barrett's esophagus, a condition in which the color and composition of the cells lining the lower esophagus change because of repeated exposure to stomach acid. Barrett's esophagus can cause esophageal cancer.

Heartburn vs. Heart Attack

Since heartburn is often associated with the sensation of chest pain, how can people know for sure their pain is associated with heartburn and nothing more serious like a heart attack?

It could be a heart attack if:

- the sudden pressure, tightening, squeezing or crushing pain in the center of the chest lasts more than a few minutes;
- pain spreads to the back, neck, jaw, shoulders or arms — especially the left arm;
- chest discomfort is accompanied by shortness of breath, sweating, dizziness or nausea; and
- pressure or tightness in the chest during physical activity or when you're under emotional stress.

In these instances, patients should contact a healthcare provider immediately.

If the pain turns out to be heartburn, patients should take the steps to control what they eat, seek relief from meds and go for a walk, instead of lying down, after dinner. ■

Sources

American Gastroenterological Association (www.gastro.org)
 Mayo Clinic (www.mayoclinic.com)

Compiled by Stacey Miller, associate editor at *ADVANCE*.

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