

HEARTBURN HELP

Understand your options

by Dr. Naoki Chiba

H EARTBURN — that rising, burning sensation that hits you under the breastbone, often after eating. It happens to most people once in a while. Simple changes can help, like watching what and when you eat. But if you get frequent heartburn you may have what's known as gastroesophageal reflux disease, or GERD, and want a drug for relief.

Heartburn is what you feel when stomach acid regurgitates into the esophagus, the tube leading from the mouth to the stomach. Usually, a sphincter between the esophagus and the stomach allows food into the stomach but prevents it from coming back up. When this sphincter isn't working properly, what's in the stomach rises back up into the esophagus and irritates the soft tissue lining the tube. About 40% of people with significant heartburn suffer damage to the esophagus (esophagitis). If you're younger than 50 and have typical heartburn, then you can self-treat with over-the-counter (OTC) drugs. If you have more troublesome symptoms of GERD, it's time to see your doctor.

Treatment options

GERD can be treated in different ways, depending on how often you have symptoms and how severe they are.

Minor symptoms

If your heartburn doesn't happen often, some basic lifestyle changes will probably help: eat smaller, more frequent meals (don't overeat!), never eat within four hours of going to bed and avoid alcohol, peppermint, fatty or spicy foods, sweets and coffee. Wearing loose-fitting clothes and raising your head when lying down can help stop acid from regurgitating. Antacids, available OTC, can also help to neutralize stomach acid. ▶

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Serious symptoms

For more troubling symptoms, you might need prescription drugs to control acidity. While these drugs don't prevent regurgitation, they do make what rises up from the stomach less acidic. Two categories of acid-lowering drugs are available and are known as H2-receptor blockers (H2RAs) and proton-pump inhibitors (PPIs).

How acid-lowering drugs work

To understand how GERD medications work, it's important to know how the stomach creates acid. The stomach lining contains specialized cells called parietal cells, which produce acid in response to certain chemicals in the body. Whenever you smell and taste food or have it in your stomach, the brain releases three chemicals: histamine, acetylcholine and gastrin. Acid-lowering drugs work by controlling how stomach cells react to these chemicals.

H2RAs

Available for over 20 years, four H2RAs can be bought in Canada: cimetidine, famotidine, nizatidine, and ranitidine. H2RAs stop histamine (one of the meal-time chemicals) from acting on the stomach's parietal cells, making them less able to produce acid. They are best taken 30 minutes before a meal so they reach peak levels as the stomach is producing acids during digestion.

H2RAs lower acid levels in reflux enough to offer good relief from heartburn.

PPIs

Proton pump inhibitors (PPIs) work by blocking acid production at its source. Parietal cells in the stomach create acid using a specialized pump in each cell. When the brain releases mealtime chemicals, the pump starts making acid. PPIs permanently block the pump in each cell. This is especially important after eating, because even though the mealtime chemicals are released, acid won't be produced if the pump is blocked.

In Canada, five PPIs are available: esomeprazole, lansoprazole, omeprazole, pantaprazole and



ALARM SYMPTOMS

Vomiting blood, weight loss, severe loss of appetite, anemia, increased abdominal mass and difficulty swallowing are alarm symptoms and should be taken seriously. See your physician immediately: it could be more serious and should be checked out.

If you're over 50 with new symptoms you should have an endoscopy (scope test) to check out your esophagus.

rebeprazole. They're all very effective at quickly reducing acid and decreasing symptoms of GERD.

Most of the time, PPIs are prescribed for four to eight weeks, although there are cases where longer treatments are necessary. PPIs have been shown to

prevent recurrence and maintain remission from symptoms in over 80% of patients.

Some doctors may start with lifestyle modification, start you on an H2RA if needed and, if that fails to adequately control symptoms, switch you to a PPI. Others may prefer to start

you on a PPI right after lifestyle modification and potentially switch you to an H2RA after symptoms are

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controlled to maintain your heartburn-free status. Talk to your doctor about what's right for you.

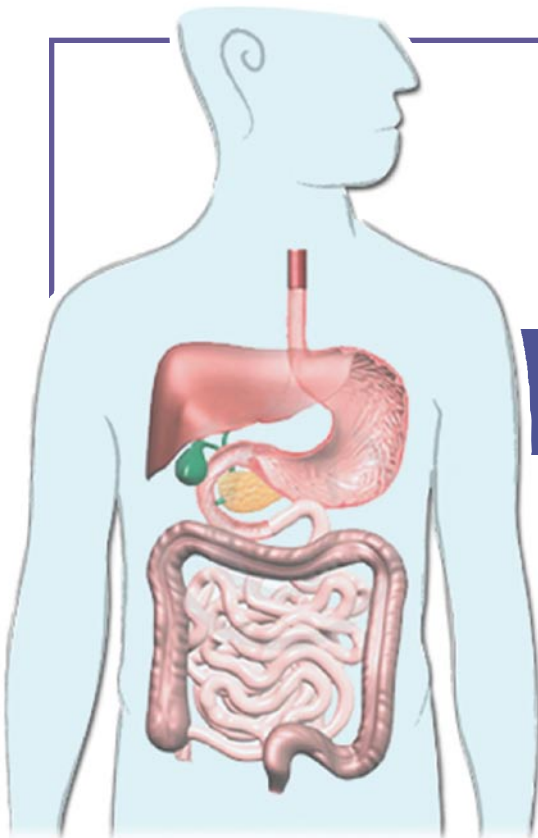
Why some acid is good

It's impossible to completely block all acid from being created, no matter what kind of drug you take. As stomach lining regenerates every two to six days, new cells are always being created, so acid production is ongoing. This is not a bad thing as some acid is essential to the healthy functioning of the body. It helps kill bacteria and assists in the absorption of

vitamin B12, which the body needs in order to use protein efficiently.

Knowledge is power

Much is now known about why heartburn occurs, what you can do to prevent it, and what drug regimens are best suited to specific types of symptoms. The key is to bring symptoms to your doctor's attention so that together, you can find ways to bring heartburn under control and keep it from interfering with your enjoyment of life. 🍌



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