

LARYNGOPHARYNGEAL REFLUX

What is Reflux?

The term reflux comes from a Greek word that means “backflow.” It usually refers to the backflow of stomach contents (acid and digestive enzymes). Normally, once the things we eat reach the stomach, digestion begins without our stomach contents coming back up again or refluxing. Reflux is a problem that tends to occur more often as we age (it is estimated that it is a problem for a third of the adults over age 40).

What is GERD and what is LPR?

Some people have an abnormal amount of stomach acid backflowing into the esophagus. This is referred to as GERD or Gastroesophageal Reflux Disease. If the reflux makes it all the way up and into the back of the throat, it is called Laryngopharyngeal Reflux or LPR. The primary symptoms of GERD are heartburn and stomach discomfort. The primary symptoms of Laryngopharyngeal reflux are different from GERD and are listed below.

Common Symptoms of LPR:

Chronic or intermittent hoarseness	Mild swallowing problems
Chronic cough	Intermittent bad taste in mouth
Frequent throat clearing	Post nasal drip feeling; phlegm
Feeling of lump or scratchiness in throat	Singing – difficulty with high notes
Pain in the voice box area	

Why don't I have heartburn or stomach problems?

This is a question that is often asked by patients with LPR. The fact is that very few patients with LPR experience significant heartburn. Heartburn occurs when the tissue in the esophagus becomes irritated. The esophagus is much more resistant to injury from reflux than the tissues in the throat or larynx and so it takes more frequent exposures to acid for heartburn to develop. Most of the reflux events that can damage the throat happen without the patient ever knowing that they are occurring and are much less frequent than those of persons experiencing GERD.

Treatment for LPR:

Mealtime:

1. Don't gorge yourself at meals
2. Eat sensibly (moderate amounts)
3. Don't eat for several hours before bedtime
4. Avoid bedtime snacks
5. Don't exercise right after meals
6. Avoid Alcohol

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Stress: Take significant steps to reduce stress! Make time in your schedule to do activities that lower stress levels. Even moderate stress can dramatically increase the amount of reflux you get.

Body Weight: Try to maintain a healthy body weight. Being overweight can dramatically increase reflux.

Foods: You should pay close attention to how your system reacts to various foods. Each person will discover which foods cause an increase in reflux. The following foods have been shown to cause reflux in many people. It may be necessary to avoid or minimize some of the following foods:

1. Spicy, acidic and tomato-based foods like Mexican and Italian foods
2. Acidic fruit juices such as orange, grapefruit, and cranberry juices
3. Fast foods and other fatty foods
4. Caffeinated beverages (coffee, tea, colas)
5. Carbonated beverages
6. Peppermint
7. Alcoholic beverages

Tight clothing: Avoid tight belts and other restrictive clothing

Smoking: If you smoke, STOP!! This makes reflux much worse

Medications for LPR:

1. **Antacids** – take one dose (as recommended on the label) of an over-the-counter antacid such as Tums, Gaviscon or Mylanta one hour after meals and at bedtime. Tums has the added benefit of containing calcium.
2. **Medications** –
 - H2 Blockers (Axid, Pepcid, Tagamet, Zantac) – can be taken without regard to meals
 - Proton Pump Inhibitors (Priolosec, Prevacid, Protonix, Nexium) – these medications must be taken on a **completely empty stomach one half to one hour before a meal**. The medications are not absorbed if there is food or drink in the stomach.

When can I expect improvement in my symptoms?

Unfortunately LPR is not as easy to treat as GERD. Often it takes several months for complete relief of symptoms. It is important to try and remember to take medications on schedule and not miss doses. Complete control of acid reflux is important to healing and resolution of symptoms.