

MEDICATIONS THAT REDUCE ACID PRODUCTION:

Medications called H₂ blockers reduce acid. These are effective for many people.

Nizatidine (Tazac®) is an H₂ blocker that also stimulates muscular contraction in the oesophagus and stomach.

Another group of acid reducing medications, called proton pump inhibitors (PPIs) are more powerful and effective in healing damage in the oesophagus and they may need to be taken indefinitely.

MEDICATIONS THAT TREAT PEPTIC ULCER DISEASE:

Helicobacter pylori is a common infection in the stomach and is associated with ulcers (duodenal or gastric) and may cause increased acid secretion. If this occurs your doctor may prescribe a combination of antibiotics plus acid suppressing medications to eradicate the bacteria permanently.

There are also breath tests that can help establish whether there is Helicobacter pylori in the stomach.

Tests your doctor may recommend

If symptoms are frequent enough to justify medications other than antacids, your doctor may recommend an endoscopy. This will show whether there is any inflammation or ulceration in the oesophagus.

An endoscopy may also show if you have any changes in the lining of the oesophagus that are important for long-term health and establish the need for continuing acid suppression. This is particularly important if you have a family history of hiatus hernia, Barrett's Oesophagus or cancer.

Sometimes a barium meal is used to show whether there is any disturbance of the muscular contractions in the oesophagus.

Complications of untreated Heartburn

Most heartburn responds quickly to medication and lifestyle modifications. To reduce the risk of complications, if you are using antacids frequently, discuss the problem with your doctor. Recent pharmaceutical and technological advances now offer many options for treating heartburn.

Will I need surgery for my Hiatus Hernia?

Long-term acid suppressing medications are effective and reliable. Surgery may be another option.



Heartburn prevention

Look at your diet and lifestyle:

- Cut down on spicy and fatty foods
- Reduce coffee and tea intake
- Stop smoking
- Moderate alcohol consumption
- Keep to a healthy weight
- Make meal times relaxed

Discuss all medications with your doctor, as they may aggravate symptoms.

Heartburn, also called reflux, is a burning sensation occurring in the chest, often starting low down and moving upwards. It is sometimes accompanied by a bitter or sour taste in the mouth due to the acidic stomach contents refluxing upwards. It may be worse if you lie down after a large meal, bend, stoop or strain.

Indigestion is the discomfort or pain you may feel after eating, particularly if you had a larger meal or too much to drink.

If you get burning pain behind the breastbone on exercise, this may not be reflux, but could be heart pain (angina). Consult your doctor.

Common medications used to treat symptoms include **antacids**, which **neutralise** stomach acids.

MEDICATIONS THAT REDUCE ACID PRODUCTION BY THE STOMACH INCLUDE:

- H₂ blockers such as Zantac™, Tagamet™, Pepcidine® and Tazac® (also stimulates muscular contraction)
 - Proton pump inhibitors (PPIs) such as Somac®, Zoton™, Losec®, Pariet™ and Nexium™.
- Persistent or frequent heartburn can be controlled with proton pump inhibitors.

CONSULT YOUR DOCTOR IF:

- your heartburn/indigestion medicines are not providing complete relief
 - you have difficult or painful swallowing
 - you have recent unexplained weight loss
- Severe and persistent heartburn is a risk factor for cancer of the oesophagus.

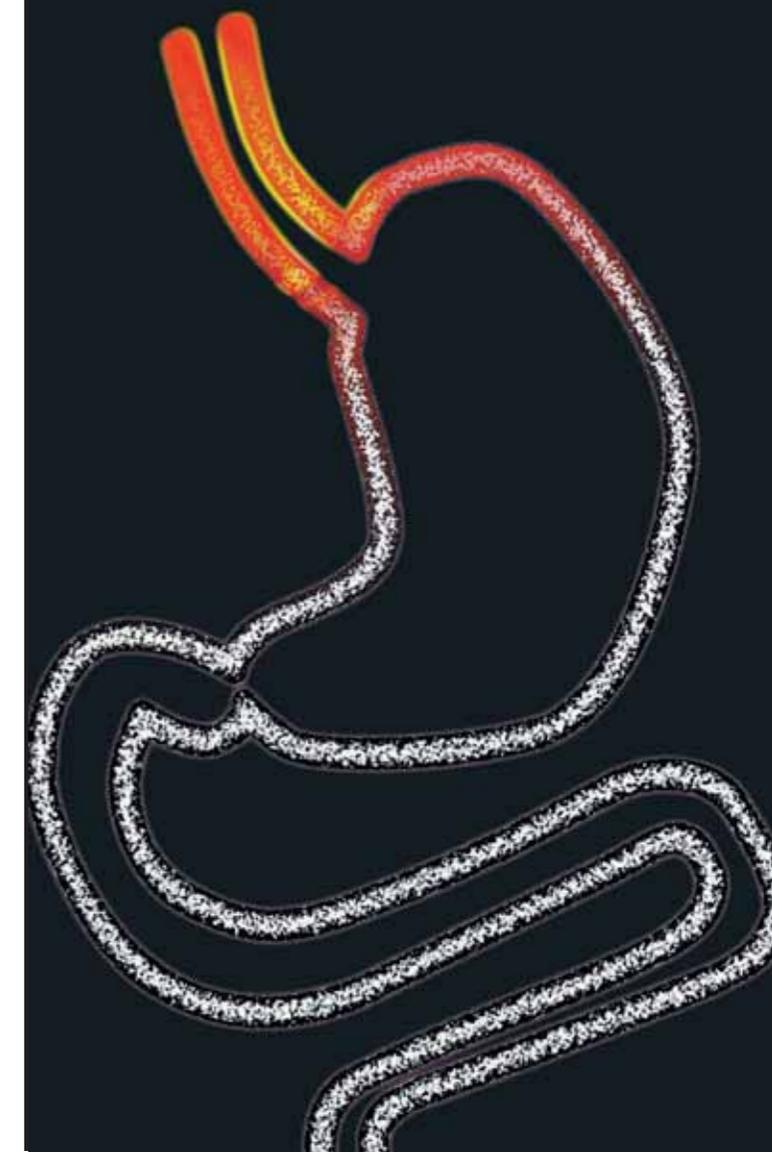
FOR MORE INFORMATION ASK YOUR DOCTOR OR PHARMACIST ABOUT UNDERSTANDING HEARTBURN AND REFLUX.

QUESTIONS THAT CAN HELP DECIDE WHETHER YOU NEED MORE INTENSIVE TREATMENT FOR YOUR HEARTBURN OR NEED EXAMINATION OF THE OESOPHAGUS AND STOMACH (ENDOSCOPY).

	Yes	No
Do you suffer with frequent heartburn?	<input type="checkbox"/>	<input type="checkbox"/>
Do you take antacids more than once a month?	<input type="checkbox"/>	<input type="checkbox"/>
Are you taking over-the-counter H ₂ blockers such as Zantac™/ Zantac™ Relief/Pepcid® more than once a month?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any difficulty swallowing?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any chest pain that is aggravated by swallowing food or drinking hot or cold liquids?	<input type="checkbox"/>	<input type="checkbox"/>
Is there a history in your family of cancer of the stomach or oesophagus?	<input type="checkbox"/>	<input type="checkbox"/>
Have you recently lost weight and don't know why?	<input type="checkbox"/>	<input type="checkbox"/>
Are you also taking:		
● Aspirin/Naproxen/Nurofen™/ACT3®/ Tri-Profen™/Voltaren Rapid® or other nonsteroidals such as arthritis medicines	<input type="checkbox"/>	<input type="checkbox"/>
● Antidepressants	<input type="checkbox"/>	<input type="checkbox"/>
● Medications for osteoporosis	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered YES to any of these questions, consult your doctor or ask your pharmacist about more effective treatment.

Understanding heartburn and reflux.



What is Heartburn?

Heartburn, also called reflux, is a burning sensation occurring in the chest, often starting low down and moving upwards. It is sometimes accompanied by a bitter or sour taste in the mouth due the acidic stomach contents refluxing upwards.

There may also be episodes of more severe pain due to underlying damage that occurs with excessive acid reflux.

If the damage is severe, there may be narrowing of the oesophagus. This may cause solid foods such as steak, chicken, bread and pastry to "stick" on the way down.

How will I know if I have Heartburn?

The burning sensation frequently occurs after meals and may be worse if you lie down after a large meal, bend, stoop or strain. It is also common during early pregnancy and may occur due to hormone changes, or later in the pregnancy from the pressure of the growing baby.

With Heartburn, you're not alone!

Heartburn is very common-seven in ten Australians suffer from it at some stage. It is equally common in men and women, but tends to be more severe in older women. Young children may also experience heartburn, especially if they had reflux as a baby.

In some people acid reflux may also be a cause of persistent cough, hoarse voice or dental erosions.



How can I tell the difference between Heartburn and Heart pain?

The pain of acid reflux may mimic that of angina (heart disease). If your pain is worse with exercise you must check with your doctor, as it could be angina. With heart disease, physical activity increases pain, which may subside within a few minutes with rest. On the other hand, heartburn is not usually associated with physical activity, apart from bending, stooping or straining.

What is the connection between Heartburn and Hiatus Hernia?

Acid reflux occurs because the valve which joins the oesophagus and stomach and normally prevents acid reflux is weakened. Acid and stomach contents can therefore flow upwards from the stomach into the lower oesophagus, producing discomfort.

A common cause is a hiatus hernia. This occurs where a portion of the stomach protrudes into the chest through the diaphragm muscle, weakening the valve. It is also possible to have a weak valve without a hiatus hernia. Weakness of the muscular activity in the lower oesophagus, which normally pushes any acid reflux back into the stomach, may also be important.

Common approaches to help alleviate Heartburn

Indigestion can often be avoided by making simple changes to diet and lifestyle.

FOOD: Coffee, alcohol, fatty or spicy foods and pepper, are common causes of heartburn. Avoid battered or fried food, pastries, rich cakes and biscuits, and fatty foods such as hamburgers, fried chicken and pizza. Cola drinks, fruit juices and chocolate may also trigger heartburn.



EATING HABITS: Watch your weight, cut down on fat, increase fibre and exercise regularly.

LIFESTYLE AND EXERCISE: Walking each day often helps digestion and weight loss. Cut out smoking and make meals a stress-free time by eating slowly, chewing food properly and making sure meal times are relaxed.



Moderate your alcohol intake, as alcohol can weaken the lower valve of the oesophagus and increase the amount of acid produced by the stomach.

USE OF OTHER MEDICATIONS: Many medications may make acid reflux worse. These include medications for arthritis (non-steroidal anti-inflammatory drugs), aspirin, some drugs used for osteoporosis and anti-depressants.

Some common drug treatments

Heartburn can be treated effectively using various medications.

ANTACIDS: These simple traditional remedies are often effective in neutralising acid in the stomach and preventing symptoms. They include antacids/alginate preparations. However, if you need to use them frequently, discuss other possible options with your doctor.



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