

Patient information factsheet

Gastro-oesophageal reflux (endoscopy)

This factsheet explains what gastro-oesophageal reflux is, what the symptoms are and the steps that you can take to help reduce your symptoms.

What is gastro-oesophageal reflux?

Gastro-oesophageal reflux is a common condition where acid from the stomach travels up into the food pipe (oesophagus) and mouth, causing an uncomfortable burning sensation.

What causes gastro-oesophageal reflux?

Normally when food is eaten, it travels down the food pipe into the stomach, where it is then broken down by acids. After the food has been partially broken down, it passes through to the small and large intestines to be digested.

Gastro-oesophageal reflux is caused by a weakened sphincter (a small band of muscle between the food pipe and the stomach opening). Normally when food is about to enter the stomach, the sphincter relaxes (opens) and then tightens up (closes), acting as a valve to stop food from travelling back up the food pipe. However, if your sphincter is weak and unable to close properly, stomach acid and partially broken down food is able to pass back up into the food pipe, causing the symptoms of gastro-oesophageal reflux.

What are the symptoms?

Common symptoms

The main symptom of gastro-oesophageal reflux is heartburn. This is a burning feeling which rises from the upper abdomen (tummy) or lower chest up towards the neck (it actually has nothing to do with the heart).

Other common symptoms include:

- pain in the upper abdomen and chest
- feeling sick
- an acid taste in the mouth
- bloating
- belching
- a burning pain when you swallow hot drinks

Like heartburn, these symptoms tend to come and go, and tend to be worse after a meal.

Less common symptoms

Less common symptoms include:

- a persistent cough, particularly at night (this is due to the refluxed acid irritating the windpipe)
- asthma symptoms of coughing and wheezing can sometimes be due to acid reflux
- other mouth and throat symptoms (for example, gum problems, bad breath, a sore throat, hoarseness or a feeling of a lump in the throat)
- severe chest pain (which may be mistaken for a heart attack)

These less common symptoms can mimic other conditions which can make diagnosing gastro-oesophageal reflux difficult.

If you are worried about your symptoms, contact your general practitioner (GP) for advice.

How can I help myself?

Making some simple adjustments to your lifestyle can ease some of your symptoms.

Stopping smoking

The chemicals in cigarettes relax the sphincter muscle, increasing the risk of acid reflux. If you are a smoker, you may find that your symptoms ease if you stop smoking.

Weight

Being overweight puts extra pressure on the stomach and encourages acid reflux. Losing weight if you are overweight may help ease your symptoms. Check your body mass index (BMI) to find out if you're a healthy weight for your height by clicking this link: www.nhs.uk/health-assessment-tools/calculate-your-body-mass-index/calculate-bmi-for-adults

Clothing

Avoid wearing tight clothing as it can put pressure on the stomach.

Eating and drinking

Some foods and drinks may make reflux worse in some people. It's thought that some foods may relax the sphincter and allow more acid to reflux. It's difficult to be certain how much foods contribute, but if it seems that a food is causing symptoms, try avoiding it for a while to see if your symptoms improve. Foods and drinks that have been suspected of making symptoms worse for some people include peppermint, tomatoes, chocolate, spicy foods, hot drinks, coffee and alcoholic drinks.

Try to eat smaller, balanced meals at regular intervals. Avoid eating late at night and try not to eat or drink for two and a half hours before going to bed.

Posture

Lying down or bending forward a lot during the day encourages reflux. Sitting hunched or wearing tight belts may put extra pressure on the stomach which may make any reflux worse. When bending, bend from the knees, not the waist. This helps to keep the upper body in line and upright.

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Bedtime

If you experience reflux symptoms most nights, you may find the following tips helpful:

- Go to bed with an empty, dry stomach. This means not eating anything for **three** hours or drinking anything for **two** hours before you go to bed.
- If you are able to, try raising the head of your bed by 10 to 20cm (for example, using books or bricks to do this). This helps gravity to keep acid from returning into the oesophagus. If you do this, don't use any additional pillows, because this may increase abdominal pressure.
- Place a wedge under your pillow to raise your head to an angle.

Medication

Antacids (such as Gaviscon or Rennie's) neutralise the acid in your stomach to relieve indigestion and heartburn. You may find keeping some antacids close to hand helpful when you experience reflux symptoms.

Further information

Please ask the nursing staff if you have any questions about your treatment or services within the endoscopy unit.

Useful links

www.nhs.uk/conditions/heartburn-and-acid-reflux

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