

# Meds Not Always Best Solution for Chronic Heartburn

July 16 2010

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Thomas Husted, MD

(PhysOrg.com) -- If you constantly pop pills and still suffer from irritating heartburn, there may be an underlying problem more effectively -- and safely -- addressed with surgery.

"The choice to have surgery often comes down to a matter of convenience or [cancer prevention](#)," explains Thomas Husted, MD, a general surgeon with UC Health and clinical instructor at the University of Cincinnati College of Medicine.

According to Husted, many otherwise healthy young patients have an aversion to taking pills long-term to avoid reflux, so surgery to correct the underlying anatomical problem can be a more appealing solution. Other patients simply don't experience relief from acid reflux symptoms with medication, so surgical correction is the only way to stop the

problem.

"This is especially important for people who have a low-grade Barrett's esophagus, a precancerous condition that puts certain patients at higher risk for esophagus cancer," adds Husted. "When the problem is identified early, surgery can stop the tissue changes that lead to esophageal cancer."

Recent studies published in the [Archives of Internal Medicine](#) suggest the risks of taking [proton pump inhibitor](#) medications for acid reflux may outweigh the benefits for people with less serious conditions. According to the research, proton pump inhibitors can have rare but serious side effects, including bacterial infections and [bone fractures](#).

Acid reflux, known medically as gastrointestinal reflux disease, occurs when there is a breakdown of the protective mechanism between the esophagus and the stomach.

"Several anatomic functions have to work together where the stomach and esophagus meet to avoid reflux. If a part of that protective system is flawed, the patient ends up with reflux and the patient often experiences chest pain and sour tastes in the mouth," explains Husted. "Proton pump inhibitors reduce the symptoms, but they do not stop the reflux or potential changes in the esophageal lining that can lead to cancer."

Patients who had anti-reflux surgery—known medically as Nissen fundoplication—report an 87 to 95 percent improvement in symptoms one year post-surgery without medication, according to data from the Society of American Gastrointestinal and Endoscopic Surgeons.

To perform the laparoscopic anti-reflux operation, the surgeon makes several small incisions—half an inch or less—in the abdomen to insert thin surgical tools used during the procedure. Using video guidance from

inside the abdomen, the surgeon then reinforces the valve between the esophagus and the stomach by wrapping the upper portion of the stomach around the lowest portion of the esophagus. Patients typically require a one-night hospital stay, but are able to return to regular activities within two weeks.

Provided by University of Cincinnati

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