

Chronic heartburn could spur asthma in some patients

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Study reinforces the link, and a new test might be better at spotting the problem, experts say.

(HealthDay)—Chronic heartburn is a major cause of asthma in adults, a new study suggests.

The finding could help add asthma to the known health risks—including esophageal cancer—already associated with <u>chronic heartburn</u>, which is formally known as <u>gastroesophageal reflux disease</u> (GERD) and is one of the most common digestive disorders in Western nations.

GERD occurs when a muscle at the end of the esophagus fails to close properly. This allows stomach contents to leak back (reflux) into the esophagus and irritate it. GERD symptoms include frequent heartburn, chest discomfort, dry cough, difficulty swallowing, hoarseness or sore



throat, and regurgitation of food.

In this study, researchers used a new, specially designed catheter that measures levels of acid reflux exposure within the patient's airway. They believe that this new method (known by the acronym HMII) was much more effective than conventional techniques in identifying <u>patients</u> with GERD-induced asthma.

The researchers also found that for the majority of patients, asthma symptoms eased after they underwent surgery for GERD, according to the study published Jan. 23 in the journal *JAMA Surgery*.

"We have observed for some time a strong association between GERD and certain pulmonary [lung] diseases, including adult-onset asthma," study author Dr. Blair Jobe, director of the Institute for the Treatment of Esophageal and Thoracic Disease at the West Penn Allegheny Health System, said in a health system news release.

"The real challenge, however, has been our limited ability to effectively diagnose these patients and determine who precisely may benefit from surgical intervention," he added. According to Jobe, the newly devised test "is much more sensitive as means of detecting GERD in asthmatic patients than what we have traditionally relied upon."

The findings are strong enough to warrant consideration of HMII testing in adults with asthma that is not responding to <u>asthma medications</u> or in those who also have GERD symptoms, he said.

One expert wasn't surprised by the findings.

"GERD is a common condition affecting millions of Americans," noted Dr. David Bernstein, gastroenterologist and chief of the division of hepatology at North Shore University Hospital in Manhasset, N.Y. He



said that "reflux of gastric acid through the esophagus and into the lungs is a common cause of chronic cough and asthma."

But it may be too early to advocate for widespread diagnostic testing using the new method, he added.

"This new technique is interesting and needs to be further evaluated before it can replace currently accepted diagnostic techniques," Bernstein said.

However, he believes that surgery is not always warranted for patients with reflux-linked <u>asthma symptoms</u>.

"Surgery for GERD-induced <u>asthma</u> is seldom necessary due to the ability of high-dose anti-acid medications in controlling the vast majority of reflux cases," Bernstein contends. "It is premature to recommend anti-reflux surgery without an adequate trial of anti-acid medications."

More information: The U.S. National Institute of Diabetes and Digestive and Kidney Diseases has more about <u>GERD</u>.

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