

Gastroesophageal Reflux Disease (GERD)

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People with ALS have a greater tendency towards GERD, gastroesophageal reflux disease, due to a weakening of the lower esophageal sphincter allowing the strong acids of the stomach to reflux into your esophagus and into the back of your throat. There is a possibility that you can inhale the acid into your lungs or this may cause laryngospasm (a brief blockage of the airway). Some of the symptoms of GERD may be mistaken for something else. These symptoms include “heartburn”, pain in the pit of your stomach, awakening at night coughing, choking, wheezing or shortness of breath, especially awakening you at night. Mention any new symptoms to your physician. Following are some ideas to minimize GERD:

1. Medications Antacids neutralize the acid and strengthen the lower esophageal sphincter. Proton pump inhibitors (such as Tagamet) decrease the amount of acid produced.
2. Remain erect after meals Gravity helps to pull stomach contents down, so it helps to stay erect for at least one hour after meals.
3. Sleep with chest elevated. Place 4-6 inch blocks under the bedposts at the head of the bed, or use a wedge or an electric bed.
4. Avoid smoking. Nicotine paralyzes the lower esophageal sphincter and thus the acid will reflux into the esophagus.
5. Avoid tight pants. This will push stomach contents upward.
6. Avoid irritating substances. Aspirin (Bufferin, Anacin Excedrin, Vanquish, Alka Seltzer), ibuprophen, caffeinated medicines and drinks (coffee, tea, cola, No-Doz, diet pills) spices (including pepper), alcohol, fatty foods (butter, cream sauces, chocolate, mints).

7. Talk to your physician

Some medications, especially heart medications, may cause the lower esophageal sphincter to be weaker.