

Gastroesophageal Reflux (GERD)

A Frequent Trigger of Asthma

Of all the many conditions that commonly affect our society, gastroesophageal reflux (GERD) may be one of the most important, and no wonder. How many other conditions cause such different symptoms such as nausea, “heartburn”, chest discomfort or pain, laryngitis, cough, shortness of breath and chest tightness, to name a few? The chest discomfort and pain can be very severe and mimic a heart attack, which of course requires immediate emergency evaluation and treatment. And for patients with allergies and asthma, GERD may cause significant worsening of breathing just like any other asthmatic attack.

Just how common is GERD? Estimates show that 65% of adults have suffered heartburn and 24% have had symptoms for more than 10 years. As many as 1/3 of patients with asthma may have GERD as a trigger for their breathing problems, in addition to other triggers such as viral infections, sinusitis, allergies, weather changes and exercise.

The way GERD triggers asthmatic attacks is not entirely known, but there are two interesting possibilities. When reflux occurs, stomach acid moves backward into the esophagus instead of helping to digest food and move forward into the intestines. The acid may trigger nerves around the esophagus, and nervous impulses then reach the lungs to cause airway narrowing, shortness of breath, pain and tightness. Stomach acid may also directly move into the esophagus, burn the throat and vocal cords and enter the lungs directly to cause inflammation, airway narrowing and mucus production. Symptoms tend to be worse at night when lying down or just after a meal, and asthmatics will complain of trouble sleeping due to chest tightness and shortness of breath. In either case, symptoms can be quite severe and must be treated immediately.

Recent studies have shown that a certain bacteria, *helicobacter pylori*, are responsible for the vast majority of patients with stomach ulcers. The same bacteria may be responsible for patients having GERD. This is important because *helicobacter* can be killed, and the condition cured, with combination drug therapy using 1 or 2 antibiotics and with Pepto-Bismol or medication to reduce stomach acid production.

Stomach acid can be best reduced 1 of 2 ways: (1) When histamine acts on special stomach “H2 receptors”, acid is made. Over the counter and prescription medications, such as Tagament or Zantac, will block histamine and therefore acid production; (2) more recently, the development of proton pump inhibitors (PPI), has reduced acid production very effectively. The list of available prescription drugs has been increasing, and now includes Aciphex, Prevacid, Protonix and the newest drug, Nexium. Nexium is a derivative of Prilosec (now available over-the-counter). Most studies suggest that PPI drugs may also control and prevent asthmatic symptoms that are caused by GERD. As mentioned, PPI drugs are oftentimes used in combination with antibiotics to cure ulcers, with little if any side effects. PPI drugs are usually recommended once daily, and may be needed indefinitely to control GERD, or as needed for ulcer management.