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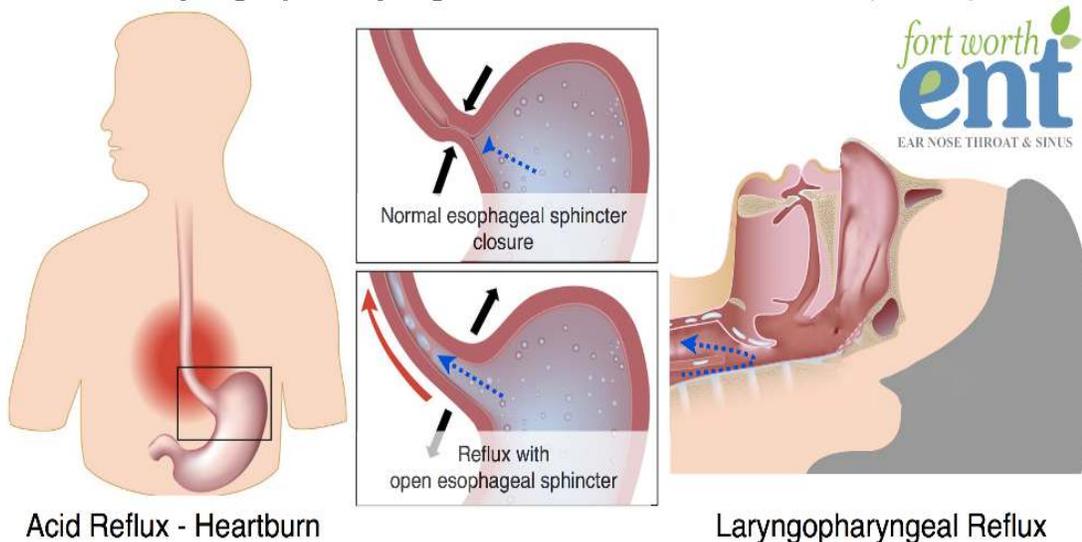
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Acid Reflux (Laryngopharyngeal Reflux LPR)

Acid reflux

Laryngopharyngeal Reflux Disease (LPR)



This leaflet is about acid reflux, also known as laryngo-pharyngeal reflux ('LPR'). It tells you some of the things you can do to reduce the risk, frequency and severity of attacks. If you have any further questions or concerns, please do not hesitate to speak to your speech and language therapist (SLT).

What is acid reflux?

Stomach juices are made up of strong digestive acids, containing enzymes, to break down our food and bile from the gall bladder. The stomach lining is designed to cope with these juices but sometimes they 'leak' out and travel upwards into the oesophagus (the tube connecting the throat to the stomach). Here they can cause irritation resulting in symptoms such as indigestion or heartburn.



In some people, small amounts of stomach acid can ‘reflux’ back into the voice box (larynx), causing irritation and hoarseness. This is also known as laryngopharyngeal reflux (‘LPR’). It may also be referred to as ‘silent reflux’ because many people do not experience any of the classic symptoms of heartburn or indigestion.

The most common symptoms of LPR are:

- § a sensation of food sticking or feeling of ‘lump in the throat’
- § hoarseness (when your voice changes and becomes crackly or rough)
- § frequent throat clearing
- § difficulty swallowing (especially tablets or solid foods)
- § sore, dry throat
- § unpleasant taste at back of mouth
- § coughing or choking after lying down
- § excessive burping, particularly during the day
- § chronic cough
- § tickly, scratchy or burning sensations in the throat

What causes it?

There may be a number of underlying causes of acid reflux, including problems with the stomach, the oesophagus or the muscle that separates the two. But in many cases, lifestyle factors such as being overweight, smoking and consuming too much alcohol and caffeine are likely causes. Your diet may also play an important role and spicy or fatty foods, chocolate and citrus fruits can often contribute to symptoms of LPR.

What can I do to help?

There are many things you can do to help reduce the risk, frequency and/or severity of attacks of acid reflux.

Food and drink

- Eat smaller, more frequent meals, rather than starving yourself and then eating a big meal.
- Eat less in the evening and leave at least two hours between your last meal and going to bed.
- Avoid eating ‘on the run’.
- Sit upright when eating; don’t sit in a low armchair with a tray on your lap.



- Try to remain upright for at least one hour after eating. Avoid slumping or bending over after eating.
- Avoid exercising immediately after a meal.
- Drink plenty of water.

Foods to avoid

- hot, spicy food, tomato-based foods, onions, citrus fruits, juices, anything with vinegar
- fried, fatty or greasy foods
- coffee and tea (both caffeinated and decaffeinated)
- chocolate
- fizzy drinks.
- alcohol
- very salty, crispy or crumbly foods - these may increase the irritation already caused by the reflux.

Lifestyle

- Avoid wearing tight clothing around your middle.
- Avoid stressful situations if you can and do things to help you to relax such as relaxation classes, yoga or swimming.
- If you smoke, give up. For more information on giving up smoking, please call the NHS Smoking Helpline on 0300 123 1044 or speak to your GP.
- Raise the head end of your bed by putting blocks underneath, 10-25 cm high. Just using more pillows will not do the trick.
- If you are overweight, ask your doctor for some help and advice about losing weight.

Medicines

Certain medicines may increase your risk of getting acid reflux. These include:

- antibiotics
- steroids
- iron supplements
- fluoxetine and some other antidepressants
- aspirin, ibuprofen and some other anti-inflammatory medicines



□ warfarin and some other medicines that help prevent blood clots.

Some medicines not listed above may also be contributing to your reflux. **Do not stop** taking medicines you have been prescribed, but ask your **GP** or pharmacist for advice if you have any concerns.

Some medicines can help with acid reflux. In the short term you can take a “raft-forming” antacid such as **Gavison Advance®** – this forms a barrier in your stomach to help prevent acid reflux. Alternatively, you could take a medicine that reduces the amount of acid produced in your stomach (for example, rantidine or omeprazole). If you have persistent symptoms, talk to your **GP** who may prescribe you some stronger medication if your reflux is bad.