



GERD, Diet and What Next?

Patricia L. Raymond, MD FACP FACG

Simply Screening , Total Endoscopic Health & Prevention

Anti-Reflux Diet

Food Groups	Allowed Items	Avoid
Beverages	Milk: skim, 1%, 2%, low-fat buttermilk, juices (except citrus, decaffeinated, non-mint tea)	Whole milk, chocolate milk, chocolate shakes or drinks: citrus drinks or juices, carbonated beverages, tomato juice, vegetable juice, mint tea, coffee (regular or decaffeinated); alcoholic beverages
Breads and cereals	Plain bread, cereals, rolls, biscuits, crackers; pancakes, waffles, French toast, muffins made with low-fat ingredients; bagels; corn tortillas	Breads and cereals prepared with high-fat ingredients such as croissants, doughnuts, sweet rolls, muffins
Desserts	Angel food cake, sponge cake, low-fat cookies; gelatin; fruit-based desserts, sherbet, fruit ice, low-fat yogurt, reduced-fat ice cream, pudding or custard made with 1% or 2% low-fat milk	All other pies, cookies, cakes, and ice cream; any dessert containing chocolate
Fats	Nonfat or low-fat dressings and mayonnaise; nonfat liquid or powdered cream substitutes, nonfat sour cream	Gravies; bacon; meat drippings; butter, margarine, vegetable oils, heavy cream, sour cream
Meats and meat substitutes	Lean meat; poultry (without skin); lean pork; fish, shellfish; low-fat yogurt, low-fat cheeses; tofu; dried beans and peas; eggs (3-4 egg yolks per week)	Fried meat, poultry, fish or eggs; regular luncheon meats, hot dogs, sausages; refried beans
Potato and substitutes	Bakes, broiled and mashed potatoes without extra fat; pasta, rice	French fries, potato chips; pastas served with cream or tomato sauce
Soups	Fat-free broths, soups made from low-fat ingredients	Regular cream or tomato based soups
Sweets	Sugar; honey; jam; jelly; molasses; maple syrup; hard candy; marshmallows	Butter, coconut, chocolate and cream candies
Vegetables	Plain fresh, frozen and canned vegetables prepared without added fat	Fried or creamy style vegetables; tomatoes and tomato products
Miscellaneous	Salt, garlic, oregano, sage, pepper, other spices and herbs	Spices and herbs in tomato-based sauces, spearmint, peppermint; chili and jalapeno peppers; vinegar

What if my GERD doesn't improve with diet and medication?

If your symptoms remain unrelieved with medications and diet, you may need to look into surgical intervention. The main form of surgery is a "wrap" surgery, in which the top portion of the stomach (called the fundus) is wrapped around the lower end of the esophagus. This wrap gives extra pressure to the low end of the esophagus, reducing the regurgitation of contents. Surgeons do the various wrap procedures through a mini incision with a laparoscope.

Before having the procedure done, an esophageal manometry (motility) test is essential to confirm that your esophageal peristalsis is strong. If it is not, a wrap may leave you with food that can't completely traverse your esophagus into the stomach, as the peristaltic waves cannot overcome the new high-pressure zone resulting from a tight wrap. The motility test involves a thin vinyl tube inserted without sedation through your nose and into your esophagus. This tube has pressure monitors at intervals along its length. After insertion, you are asked to sip and swallow water, and the resulting recordings tell us if you are a candidate for the surgery.

If you are not, your doctors will help you maximize your medical and lifestyle management until other options come along. Your cooperation and attention will lead to reasonable, although imperfect, control of symptoms. Be patient as we await new medications and techniques to enhance your comfort.

What are the consequences of untreated reflux?

Untreated GERD may be worse than just discomfort in your chest. Sleep disturbance, decay of your dental enamel, hoarse voice, chronic cough or throat clearing, worsened asthma, and strictures (a narrowing in the esophagus with stickage of food) may result if not treated. The chest pain may mimic a heart attack.

GERD may also lead to esophageal cancer. Usually this occurs in an esophagus that has developed "Barretts Esophagus" (www.fhcrc.org/phs/barretts/plain.htm), a condition associated with up to a 30-fold increase in cancer. In Barretts, lining of the lower end of the esophagus transforms into stomach or intestinal lining to protect itself from injury.

As Barretts cannot be seen on x-ray, it is recommended that all with longstanding GERD (>10 years) or members of the at-risk population (smokers, males over 50, folks with night time heartburn) have a one-time shot upper endoscopy to see if Barretts is present.

**An Educational Service of:
Patricia L. Raymond, MD, FACP, FACG
680 – D Kingsborough Square, Chesapeake, VA 23320
757-54SCOPE (547-2673) fax 757-547-7727**

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