



الشراكة الطلابية

مشروع التثقيف الصحي Health Education Project

Laryngopharyngeal Reflux



What is Laryngopharyngeal Reflux (LPR)?

Acid is normally produced in the stomach. It is prevented from backing up or refluxing into your esophagus (or food pipe) and throat by a band of muscle at the entrance of the stomach known as the lower esophageal sphincter. If this band of muscle is not functioning well, you can have a backflow of acid into your esophagus and into your throat and voice box, this is called laryngopharyngeal reflux (LPR).

But I Don't Have heartburn?

Many people with LPR do not have symptoms of heartburn. Compared to the esophagus, the voice box and the back of the throat are significantly more sensitive to the affects of the acid on the surrounding tissues. Acid that passes quickly through the food pipe does not have a chance to irritate the area for too long. However, acid that pools in the throat and voice box will cause prolonged irritation resulting in the symptoms of LPR.

What are the symptoms?

The symptoms of laryngopharyngeal reflux can consist of a dry cough, chronic throat clearing and a sensation of something being stuck in the throat. Some people will also complain of heartburn, while others may have intermittent hoarseness or loss of voice. Another major symptom of LPR is "postnasal drip". The patients often have been told that their symptoms are abnormal nasal drainage or infections, however, this is rarely the cause of the irritation. In order for the "postnasal drip" to cause the complaints described, signs and symptoms of active nasal infection has to be present.

Diagnosis

Your doctor may do one of the following tests to determine if you have LPR:

(Laryngoscopy)

This procedure is used to see changes of the throat and voice box.

(24-hour pH testing)

This procedure is used to see if too much stomach acid is moving into the upper esophagus or throat. Two pH sensors are used. One is located at the bottom of the esophagus and one at the top. This will let the doctor see if acid that enters the bottom of the esophagus moves to the top of the esophagus.

(Upper GI Endoscopy)

This procedure is almost always done if a patient complains of difficulty with swallowing. It is done to see if there are any scars or abnormal growths in the esophagus, and to biopsy any abnormality found. This test will also show if there is any inflammation of the esophagus caused by refluxed acid.

What Treatment Will the Doctor Recommend?

There are four general treatments for LPR:

Posture changes and weight reduction. Diet modifications. Medications to reduce stomach acid or to promote normal motility. Surgery to prevent reflux.

Your doctor might prescribe medications to either reduce or completely shut off the amount of acid in the stomach. Sometimes a medication that promotes motility might also be prescribed. Rarely, there are individuals who have a severe resistant to medical management. Surgery is then recommended to tighten the lower esophageal sphincter.

How Long Do I Need Medication?

Most patients will begin to notice some relief in their symptoms in about two weeks. However, it is generally recommended that the medication be continued for about two months. If the symptoms completely resolve, the medication can then begin to be tapered. Some people will be symptom free without the medication while other people may have relapses which require treatment again.

Things That You Can Do To Prevent Reflux

- Do not smoke. Smoking will cause reflux.
- Avoid tight fitting clothes around the waist.
- Avoid eating three hours prior to bedtime. In fact, avoid eating a large meal at night.
- Weight loss. For patients with recent weight gain, shedding a few pounds is often all that is required to prevent reflux.
- Foods to avoid: caffeine, cola beverages, citrus beverages and mints, alcoholic beverages, particularly at night, cheese, fried foods, eggs and chocolate.
- For patients with more severe symptoms, it is helpful to sleep with the head of the bed elevated. Six inches of bed elevation will decrease reflux significantly

For more info please visit: www.hep-ksu.info or contact: 014786100 ext.1422



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