

Cooling Heartburn

It's called "heartburn," although that burning feeling in your chest has nothing to do with your heart. It has more to do with the acid in your stomach. Your stomach acid breaks down the starch, fat and protein in your food. When this sour mix of digestive juices backs up into your esophagus you experience the heartburn. Your esophagus is a muscular tube connecting your throat to your stomach.

Anyone who eats a lot of acidic foods may have mild heartburn. Almost everyone has had heartburn at some point in life. About one in five Americans has heartburn at least once a week.

Heartburn is most common after a large meal. Too much food stretches your stomach. This stretching puts pressure on the ring of muscle that controls how food enters your stomach. This muscle is called the lower esophageal sphincter or LES.

Food Triggers

In some people, particular foods and drinks cause the LES muscle to relax. This allows stomach acid to back up into the esophagus. Some common heartburn triggers include:

- Drinks with caffeine or alcohol
- Citrus fruits and juices
- Chocolate
- Peppermint and spearmint
- Tomatoes and tomato sauces
- Onions and garlic
- Spicy foods
- Fatty and fried foods

Physical Conditions That May Affect Heartburn

Certain conditions may make heartburn worse.

Heartburn is more likely if you have a hiatal hernia. A hiatal hernia is when the top part of the stomach sticks up into the chest cavity. This weakens the LES muscle. Your doctor can tell you if you have this type of hernia.

Obesity may make heartburn worse. Too much weight, especially around the middle, puts pressure on the stomach. In some cases, heartburn episodes go away after an overweight person loses 10 to 15 pounds.



Pregnancy can bring on heartburn. The growing baby can put pressure on the stomach. Also, a pregnant woman's hormone levels tend to relax the LES muscle.

Common Drugs and Heartburn

Prescription drugs may make heartburn worse. Some of the most common ones include:

- Beta-blockers (for high blood pressure or heart disease)
- Calcium channel blockers (for high blood pressure)
- Progestin (for birth control or abnormal menstrual bleeding)
- Sedatives (for anxiety or sleeplessness)

If you suspect that one of your medicines may be causing heartburn, talk to your healthcare provider. Never stop taking medicine without talking to your doctor.

Smoking and Heartburn

There are many ways smoking affects heartburn. Smoking affects the LES muscle, increases acid production and damages the mucous membranes in the throat. That's not all. Smoking cuts down on saliva production and saliva helps neutralize acid.

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Simple Lifestyle Remedies for Heart Burn

People with heartburn should first try lifestyle changes to remedy the problem. In addition to stopping smoking and avoiding certain foods, you should try to:

- Eat smaller, but more frequent meals.
- After meals, take a walk.
- Avoid wearing clothes with a tight waist. Don't cinch your belt too tight.

If your heartburn is worse when lying down:

- Don't go to bed with a full stomach.
- Try to sleep on your left, rather than your right, side. Sleeping on your right side can put pressure on your LES muscle.
- Sleep with your head up. Use blocks or a wedge to prop up the mattress. Pillows are not enough.

Over-the-counter Medicine

If you have heartburn from time to time, you might try taking an over-the-counter antacid like Tums, Rolaids or Maalox. Antacids work to neutralize the acid in the stomach. If antacids don't provide enough relief, an H2 blocker like Pepcid or Zantac will work to stop acid production. H2 blockers don't work as quickly as antacids but they provide relief over a longer period of time.

If antacids and H2 blockers don't help your heartburn, or if you have heartburn more than twice a week for more than a month, you should see your healthcare provider.

GERD

GERD stands for gastroesophageal reflux disease. Heartburn that occurs often and interferes with your daily life is considered GERD. If you have been using antacids for more than two weeks you may have GERD.

Treatment for GERD may require prescription medications and, occasionally, surgery or other procedures. GERD can seriously damage your esophagus so it's important to see your doctor.

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Make an appointment with your healthcare provider if you have severe or frequent heartburn. If you take over-the-counter medications for heartburn more than twice per week, see your doctor.

It is important not to mistake a heart attack for simple heartburn. Seek medical help right away if you experience chest pain, especially if you have shortness of breath or pain in your jaw or arm. These may be signs of a heart attack, not just a bad case of heartburn.

If heartburn and GERD go untreated, serious complications may develop over time. These could include:

- **An open sore in the food pipe called an esophageal ulcer.** Stomach acid can erode tissues in the esophagus, causing an open sore to form. The painful ulcer may bleed and make it hard to swallow.
- **Narrowing of the esophagus.** Damage to cells in the lower esophagus from acid may cause scar tissue. The scar tissue narrows the food pathway, making it hard to swallow.
- **Barrett's esophagus.** In Barrett's esophagus, the lining the esophagus changes. These changes may lead to esophageal cancer. In addition, a 2013 study found that frequent heartburn increases the risk for throat cancer.

Almost everyone experiences heartburn now and then. Knowing what foods trigger your heartburn will help you prevent future episodes. Heartburn treatment may include lifestyle and diet changes and medication. Don't ignore heartburn. Frequent heartburn may lead to GERD. Untreated this may cause serious complications over time. Be sure to talk with your health care provider about how you can best treat your heartburn.

Resources

National Digestive Diseases Information Clearinghouse (NDDIC)
A service of the [National Institute of Diabetes and Digestive and Kidney Diseases \(NIDDK\)](#), [National Institutes of Health \(NIH\)](#)