

# Heartburn

*When the pain  
hasn't gone away...*

"Do you have heartburn? If so, you are not alone. In fact, **1 out of 5 Canadian adults** suffer from heartburn at least once a week and unfortunately, it is a problem that is not taken seriously enough. Approximately 75% of heartburn sufferers have never seen a doctor about it. As a physician, I can assure you that there are a number of ways to relieve your symptoms and reduce the risk of complications."



Dr. Roxane Néron  
ACTI-MENU Health Program

## *Never seen a doctor about your heartburn?*

Occasional heartburn is nothing to worry about. However, **if you are experiencing one of the signs below**, you should see a doctor to determine the actual cause of your discomfort and get the best treatment for it.

- Heartburn or acid regurgitation every week
- Disrupted sleep due to discomfort
- Frequent use of over-the-counter medication to obtain relief
- Symptoms that persist for a few months

## *Should your doctor reassess your condition?*

If you already take prescription medication for any of the following stomach symptoms, answer the 5 questions in the **PASS test**, a questionnaire published in the *Canadian Journal of Gastroenterology*.

- stomach pain or discomfort
- heartburn
- sour taste in mouth/acid regurgitation
- excessive burping/belching
- increased abdominal bloating
- nausea
- early satiety

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## PASS test

### 1 Are you still experiencing stomach symptoms?

☐ Yes ☐ No

### 2 In addition to your main medication, are you taking any of the following medications to control your symptoms?

- Antacids (e.g.: TUMS®, Roloids®, Maalox®)
- H<sub>2</sub> blockers (e.g.: ranitidine, Zantac®, Pepcid®)
- Motility drugs (e.g.: Motilium®)
- Others (e.g.: Gaviscon®, Pepto-Bismol®)

☐ Yes ☐ No

### 3 Is your sleep affected by your stomach symptoms?

☐ Yes ☐ No

### 4 Are your eating and drinking habits affected by your stomach symptoms?

☐ Yes ☐ No

### 5 At any time do your stomach symptoms interfere with your daily activities?

☐ Yes ☐ No

If you answered yes to at least one of these questions, you may benefit from a change in therapy.



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# The two main causes of stomach symptoms

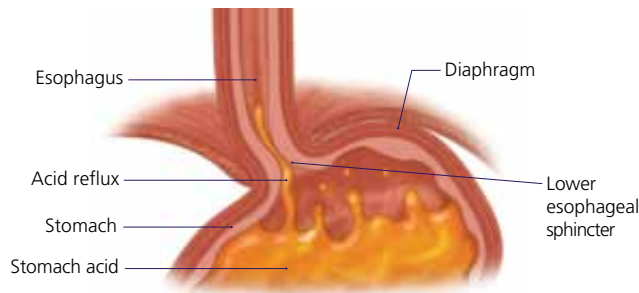
Stomach symptoms are often caused by **acid reflux** or an **ulcer**.

## what is acid reflux?

Gastroesophageal reflux, commonly called acid reflux, is often caused by reduced tone of the lower esophageal sphincter. Located where the esophagus and stomach meet, this muscle ring normally opens to allow food to pass from the esophagus to the stomach.

Acid reflux often occurs because the sphincter opens at the wrong time, allowing the acid content of the stomach to rise up to the esophagus. The wall of the esophagus is vulnerable to this strong acidity and becomes irritated, which can cause damage over time. Heartburn is a symptom of acid reflux.

**Gastroesophageal Reflux Disease (GERD)**



## what is an ulcer?

An ulcer that causes pain in the abdominal region may either come from damage to the inner membrane of the stomach (stomach ulcer) or, more often, the small intestine (duodenal ulcer). Damage to the inner membrane is often caused by a bacterial infection (*H. pylori*), or, sometimes, by the regular use of medication that is hard on the digestive system. These medications would include anti-inflammatories available over the counter, such as Aspirin®, Advil® or Motrin®, or by prescription, such as Naprosyn®, Voltaren® or indomethacin.

With an ulcer, there is pain when the acidity of the stomach comes into contact with the ulcerated area. Compared to the pain felt with acid reflux, ulcer pain is experienced lower down, in the upper abdomen.

You are likely suffering from acid reflux **if you have one of the following symptoms:**

- A burning sensation at the centre of the chest that can last a few minutes or a few hours
- Regurgitation accompanied by an acid or sour taste in the mouth

## Don't ignore your symptoms

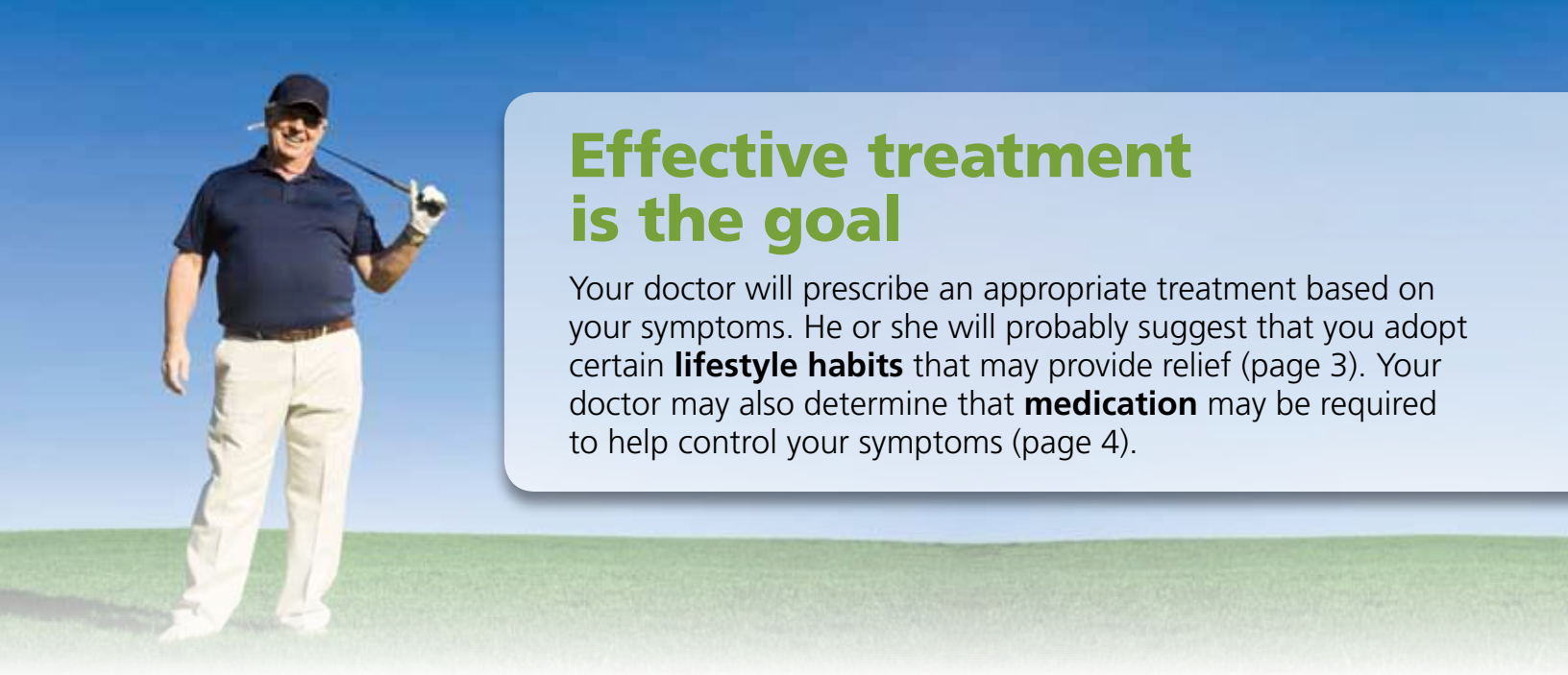
Stomach symptoms are too often not taken seriously. These problems can have a significant impact on quality of life and ignoring them could lead to complications. You should see a doctor to discuss any stomach symptoms you may be experiencing.

To help your doctor make the right diagnosis and put you on the best treatment, you should think about or write down the **answers to the following questions** before your appointment:

- What are your symptoms?
- How often and when do they occur?
- What causes, aggravates or relieves them?
- Do you have any symptoms that could be the sign of complications: difficulty swallowing, pain when swallowing, hoarseness, an unexplained persistent cough, vomiting, weight loss, blood in the spittle, black or darker than usual stools?

### Do you have a different kind of pain?

Sharp chest pain may indicate a heart problem, so you should see a doctor right away if your stomach **discomfort is more intense** than usual or if it is **different**, particularly if it occurs **after physical exertion**. If in doubt, don't take a chance. To find out more, contact Info-Santé at 8-1-1 or your provincial health information service.



## Effective treatment is the goal

Your doctor will prescribe an appropriate treatment based on your symptoms. He or she will probably suggest that you adopt certain **lifestyle habits** that may provide relief (page 3). Your doctor may also determine that **medication** may be required to help control your symptoms (page 4).

### *Lifestyle habits that could offer relief*

#### Pay attention to your diet

Certain food and drinks can trigger or aggravate your symptoms:

- Alcohol (avoid drinking alcohol on an empty stomach)
- Coffee (even decaffeinated) and food or drinks with caffeine
- Mint (fresh, in tea or herbal tea)
- Chocolate
- Fatty, fried or breaded foods
- Spicy foods
- Soft drinks
- Citrus fruits or juice (orange, grapefruit...)
- Tomatoes and tomato-based foods (spaghetti sauce, chili, pizza...)

*“To avoid overloading your stomach, eat small portions at meals, have snacks as needed and try to eat slowly. It is preferable that you drink liquids 30 minutes before or after meals rather than during meals.”*

**Nancy Arseneault, Dietitian  
CHUM – Hôpital Notre-Dame**

#### Quit smoking

Giving up smoking is highly recommended. In addition to causing numerous health problems, tobacco stimulates acid production in the stomach. The extra acid can delay and even prevent the healing of damage. If you haven't kicked the habit yet, try not to smoke after meals.

*“What works for some people may not work for others. Try different things to find out what is best for you.”*

**Dr. Roxane Néron  
ACTI-MENU Health Program**

#### Other ways to limit acid reflux

Acid reflux is to some extent a “mechanical problem” and steps can be taken to help control it. Since lying down or putting pressure on the stomach encourages the acid content of the stomach to rise up to the esophagus, **the following measures may help:**

- Raise the head of your bed at least 15 centimetres (6 inches). For instance, you can place blocks of wood under the legs at the head of your bed or a piece of firm foam under the “head” of your mattress. This is probably the most effective thing you can do.
- Avoid vigorous physical activity after meals.
- Avoid bending over after meals.
- Wait at least two to three hours after meals before lying down or going to bed.
- Don't wear clothes or belts that are too tight.
- Try to achieve a healthy weight, particularly if you carry excess weight around the waistline.



## *when medication is necessary*

The purpose of treating acid reflux or an ulcer is to relieve symptoms, heal damage and prevent recurrences and complications. Your doctor may prescribe medication from the H<sub>2</sub> blocker family, such as Zantac®/ranitidine and Pepcid®/famotidine, or from the proton pump inhibitor (PPI) family, such as Losec®, Nexium®, Pantoloc®, Pariet® and Prevacid®. The PPI family often is more effective in limiting acid production in the stomach.

- **Significant acid reflux:** Long-term use of medication that reduces stomach acid is generally the best solution.
- **Ulcers that are bacterial in origin:** Medication to reduce gastric acid is prescribed in combination with antibiotics. Approximately 90% of ulcers of this type heal after four to twelve weeks.
- **Ulcers caused by medication that irritate the stomach:** Your doctor will ensure that this medication is essential to your health and will adjust it appropriately.

### **Follow your treatment: it's important!**

*"It's in your best interest to follow the treatment prescribed for you, both in terms of changing certain habits and taking your medication (the proper dose and the best time of day to take it). It is important to take the entire prescription, even if your discomfort goes away quickly. If some symptoms persist or if new symptoms develop, you should go back to see your doctor."*

**Sandrine Alarcon, Nurse Clinician**  
Family Medicine Group, Centre médical Laval

### **What about over-the-counter medication?**

*"If you only have occasional heartburn, over-the-counter (OTC) medication may provide relief. The most common OTC medications are Maalox®, Roloids®, TUMS®, Pepcid®, Zantac® and Gaviscon®. Because of possible long-term side effects, and more importantly, because it is essential to determine the cause of your problem, you should not use these medications regularly without discussing it with your doctor or pharmacist."*

**Philippe Allard,**  
Pharmacist

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