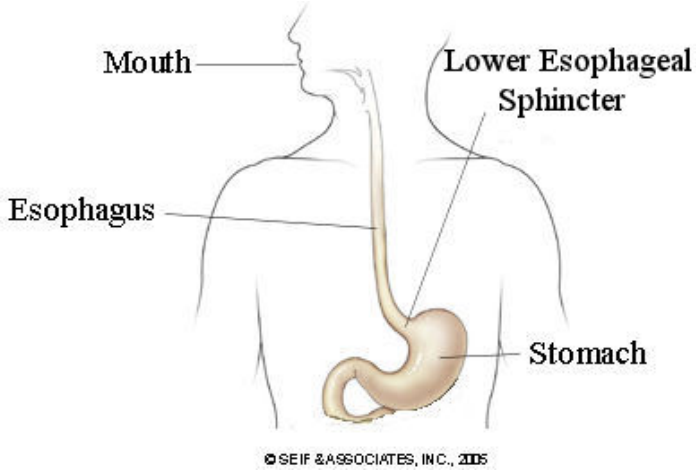
Heartburn During Pregnancy
(Esophagitis, GERD)

Heartburn is a painful, burning sensation in the chest. It may feel worse in certain positions, such as lying down or bending over. It is caused by stomach acid backing up into the tube that carries food from the mouth down to the stomach (*lower esophagus*).

GERD is more common in pregnancy because the *sphincter* (a ring of muscle tissue at the bottom of the esophagus that acts as a valve) relaxes and acid bubbles into the esophagus. Normally, the sphincter keeps the acid in the stomach. GERD is also aggravated by the enlarging womb (*uterus*) that pushes up on the stomach, pushing more acid into the esophagus. This is especially true in the later stages of pregnancy. These problems usually go away after giving birth.



CAUSES

- Increased weight and the growing uterus pushes on the stomach making acid rise.
- A relaxed sphincter muscle at the bottom of the esophagus.
- Smoking increases acid production.
- Drinking alcohol because it decreases lower esophageal sphincter pressure. This allows acid from the stomach into esophagus.
- Late evening meals. A full stomach increases pressure and acid especially when lying down after eating.
- Increase in acid production.
- Lower esophageal sphincter incompetence (born with this problem). This commonly appears in pregnancy.
- An enlarged opening in the diaphragm with the stomach moving up into the lower chest area (*hiatal hernia*).
- Obesity.
- Sometimes no reason is found.

Foods that can cause or aggravate GERD include:

- Peppers.
- Chocolate.
- Coffee.
- High-fat foods, including fried foods.
- Spicy foods.
- Garlic, onions.
- Citrus fruits, including oranges, grapefruit, lemons and limes.
- Food containing tomatoes or tomato products.
- Mint.
- Carbonated beverages.
- Vinegar.

SYMPTOMS

Symptoms may last for a few minutes or a few hours, and can include:

- Burning pain in the chest or lower throat.
- Bitter taste in the mouth.
- Coughing.

DIAGNOSIS

If the usual treatments for heartburn do not improve your symptoms, then tests may be done to see if there is another condition present. Possible tests may include:

- X-rays.
- Endoscopy. This is when a tube with a light and a camera on the end is used to examine the esophagus and

the stomach.
- Blood, breath, or stool tests may be used to check for bacteria that cause ulcers.

TREATMENT

There are a number of non-prescription medicines used to treat heartburn, including:
- Antacids.
- Acid reducers (also called H-2 blockers).
- Proton-pump inhibitors.

HOME CARE INSTRUCTIONS

- Raise the head of your bead by putting blocks under the legs.
- Eat 2-3 hours before going to bed.
- Stop smoking.
- Try to reach and maintain a healthy weight.
- **Do not** eat just a few very large meals. Instead, eat many smaller meals throughout the day.
- Try to identify foods and beverages that make your symptoms worse, and avoid these.
- Avoid tight clothing.
- **Do not** exercise right after eating.

SEEK IMMEDIATE MEDICAL CARE IF:

- Have severe chest pain that goes down your arm, or into your jaw or neck.
- Feel sweaty, dizzy, or lightheaded.
- Are short of breath.
- Throw up (*vomit*) blood.
- Have difficulty or pain with swallowing.
- Have bloody or black, tarry stools.
- Have bouts of heartburn more than three times a week for more than two weeks.

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