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## Gastroesophageal Reflux Disease (gerd)

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Gastroesophageal reflux disease (GERD) is a chronic disease usually caused by the reflux of acidic gastric and duodenal contents into the distal esophagus. Major symptoms of GERD are acidity, heartburn, acid regurgitation, and chest pain. It is a digestive disease with the direct medical costs estimated around 9.3 billion dollars annually, and with the symptoms portending a low quality of life. The most common and known phenotype of GERD is Reflux esophagitis (RE). Many countries has a high prevalence of GERD, Especially in USA, about 44% of Americans suffer from GERD symptoms at least once monthly, 17% once weekly, and 7% once daily. Traditionally, GERD is less common in Asians. The overall prevalence of RE in Japanese adults is about 16%. Aging causes various physiologic changes in GIT that may increase the risk of developing complications such as GERD. Age-related changes in the physiology of the esophagus can be divided into two categories: motility and sensory. In general, changes in esophageal motility are mild and tend to be quiet in an older patient. It is possible that both the motility and nerve changes observed in the esophagus of older patients, combined with lower comorbidities and medication use, lead to a higher risk of esophageal mucosa to reflux and cause inflammation and development of GERD-related problems. Previously, it was thought that gastric acid release decreased with age, but further research revealed that the underlying mechanism may have been Helicobacter pylori infection that eventually developed atrophic gastritis. As the prevalence of Helicobacter pylori infection has decreased over the last 3-4 decades, more recent studies have shown that gastric acid secretion is maintained normally in more than 80% of elderly subjects. Comorbidity and commonly used drugs can reduce esophageal sphincter tone, esophageal clearance mechanisms, and saliva production.

A low-fat diet likely contributes to a more favorable stomach distribution. Male gender, civil servant, smoking, strong tea, alcohol consumption, meat diet and body mass index (BMI) are risk factors associated with GERD. In many countries, dietary fat, cholesterol, saturated fatty acid (SFA), dietary fiber, and other nutrients are associated with GERD. An epidemiological study showed a link between high fat intake and GERD. Also, dietary fiber, particularly cereal fiber, has been found to reduce the risk of adenocarcinoma of the esophagus and stomach, of which GERD is a well-known risk factor. The mechanism may be that dietary fiber reduces the intake of gastric nitrites, which is thought to promote reflux by relaxing the lower esophageal sphincter (LES). A high-fiber diet has played a protective role in GERD. However, dietary fiber reduced the number of gastroesophageal refluxes, but increased their duration, and had no significant effect on gastric emptying and gastric acid secretion. Diet plays an important role in controlling acid reflux symptoms and is the first line of treatment used for people with GERD. Foods high in fiber make you feel full, so you're less likely to overeat, which can contribute to heartburn. So get healthy fiber from these foods, such as whole grains like oatmeal, couscous, and brown rice, root vegetables like sweet potatoes, carrots, and beets, and green vegetables like asparagus, broccoli, and green beans. Lemon juice is generally considered very acidic, but a small amount of lemon juice mixed with warm water and honey has an alkalizing effect, neutralizing stomach acid. In addition, honey has natural antioxidants that protect the health of cells. On the other hand, Ginger is another top digestive aid due to its medicinal properties. It is alkaline in nature and antiinflammatory, which eases irritation in the digestive tract. Try sipping ginger tea whenever you feel heartburn. The goal is to create a diet based on a healthy variety of foods, including fruits and vegetables, lean protein sources, complex carbohydrates, and healthy fats. If you suspect that food may be triggering or worsening your GERD symptoms, try keeping a daily, weekly diary.