

Pediatric Reflux: A Burp Gone Bad

Gastroesophageal reflux (GER) is the medical term for the bit of heartburn that almost everyone experiences occasionally. GER occurs when food and stomach acid travel back into the esophagus after eating, and it is caused by involuntary relaxation of the muscle that connects the esophagus to the stomach (the lower esophageal sphincter). GER is common in healthy infants, who may spit up or vomit after every meal but experience no discomfort. About half of babies with GER will stop spitting up after 6 months, and most will stop by spitting up by 18 months. However, in some people, GER persists into adulthood. When GER is chronic or causes other problems, it is labeled GERD; gastroesophageal reflux disease. In GERD, the lower esophageal sphincter is weak or doesn't function properly.

Symptoms of GERD

In babies, the symptoms of GERD may include:

- Spitting up
- Vomiting
- Coughing
- Irritability
- Blood in stools

Older children with GERD may complain of:

- Heartburn
- Frequent chest or abdominal pain
- Regurgitating or belching acid
- Sour or bitter taste in the mouth
- Salty tasting saliva
- Hoarseness
- Sore throat
- Coughing

Some symptoms of GERD that should be brought to the attention of your physician or nurse practitioner:

1. Poor growth or weight loss due to poor nutrition
2. Refusing to eat or arching the back in pain during feeding
3. Breathing problems
4. Increased vomiting or vomit that's green or yellow or looks like coffee grounds or blood
5. Difficult or painful swallowing

Treating GERD

Babies can get relief from GERD through changes in feeding & sleeping positions:

- Thicken formula or breast milk with up to 1 tablespoon of rice cereal per 2 oz of liquid
- Switch to hypoallergenic formula

- Burp your baby after every 1-2 oz of formula or after breastfeeding on each side
- Do not overfeed your baby
- Hold your baby upright for 30 minutes after every feeding
- Raise the head of the crib about 30 degrees so that your baby's head is higher than his stomach during sleep

Lifestyle changes and medications are the primary strategies for treating GERD in older children:

- Avoid chocolate, caffeine, fatty foods and spicy foods as these can cause reflux
- Eat smaller, more frequent meals and snacks
- Avoid eating 2-3 hours before going to bed
- Weight reduction if child is overweight
- Avoid second hand tobacco smoke
- Raise the head of the bed by about 6 inches
- Sleep with head on a firm, wedge shaped pillow
- Use over-the-counter medications such as Maalox and Tums to neutralize acid in the stomach.
- Histamine 2 receptor blockers such as Pepcid AC, Tagamet HB and Zantac cause the stomach to produce less acid
- Proton pump inhibitors such as Nexium, Prilosec, and Prevacid work to block the action of acid producing cells in the stomach