



AMERICAN COLLEGE OF GASTROENTEROLOGY

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Embargoed for release until:
Monday, October 15, 2007

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Studies Highlight Little Known, But Potentially Serious, Manifestations of Acid Reflux *GERD can Masquerade as Persistent Cough or even Severe Chest Pain*

Philadelphia, PA, October 15, 2007 – Many people may not realize that symptoms such as chronic cough or chest pain can be caused by acid reflux into the esophagus, because they do not experience classic heartburn symptoms or acid regurgitation. Two new studies presented at the 72nd ACG Annual Scientific Meeting highlight the little known connection between gastroesophageal reflux and seemingly unrelated problems.

Researchers at the Brigham & Women's Hospital in Boston studied patients in emergency rooms who complained of serious chest pain. They measured and recorded pH levels in the esophagus of 31 patients for two days to determine whether excessive acid caused their chest pain. Researchers found more women than men were being rushed to the emergency room with chest pain that was not related to the heart. Abnormal reflux of acid that would fit the diagnosis of GERD was seen in 57 percent of patients. There are two types of acid reflux, supine, which occurs when the patient is sleeping, and upright which occurs when the patient is awake. In this study, men had more upright reflux, while women experienced both reflux during sleep and while they were awake.

According to lead investigator Dr. Julia J. Liu, "Often the role of acid reflux has been overlooked as a potential factor in the diagnosis and treatment of patients with serious chest pain. But, it is important for patients never to assume their chest pain is caused by GERD until they have been thoroughly evaluated by a physician to rule out heart disease. If they experience persistent chest pain, they should seek emergency medical care."

Esophageal Acid Testing: Effective New Technique for Evaluating Patients with Persistent Reflux Related Cough

GERD is one of the most common causes of chronic cough. While persistent cough can be caused by acid reflux, in some cases, the cough could result from the reflux of non-acidic stomach contents. Researchers at the Medical University of South Carolina in Charleston studied a group of patients with persistent cough who took acid-suppression therapy (proton pump inhibitors) over a period of three years to evaluate the cost-effectiveness of MII-pH, a device that can detect reflux without depending on the acidity of the contents that refluxes into the esophagus. Unlike conventional pH monitoring, which measures acidity, this new technique can detect non-acid reflux.

Researchers used a cost-utility analysis to evaluate the cost-effectiveness of this diagnostic intervention among patients on high dose PPI therapy with chronic persistent cough who might be candidates for anti-reflux surgery, such as laparoscopic fundoplication. Researchers included costs of medication use, physician visits and surgery in their model.

According to Dr. Deepika Koya, “The use of MII-pH testing in patients who experience reflux of non-acid stomach contents is cost-effective by helping clinicians determine which patients would benefit from anti-reflux surgery and excluding those for whom surgery may have no benefit. This warrants further evaluation of widespread application of MII-pH testing in the diagnosis of patients with persistent chronic cough on adequate medical therapy.”

About GERD

GERD is caused by the regurgitation or reflux of gastric fluid into the esophagus. The most common symptom of GERD is frequent or persistent heartburn two or more times a week. Other symptoms of GERD include chest pain, coughing, wheezing, difficulty swallowing, and an acidic or sour aftertaste in the mouth or throat. Each year, GERD accounts for up to 60 percent of patient visits to the emergency room with chest pain not related to the heart, according to the American College of Emergency Physicians.

If you experience severe abdominal pain or chest discomfort, you should seek immediate, emergency medical treatment. By seeing your doctor early, the physical cause of GERD can be treated and more serious problems avoided.

About the American College of Gastroenterology

Founded in 1932, the American College of Gastroenterology (ACG) is an organization with an international membership of more than 10,000 individuals from 80 countries. The College is committed to serving the clinically oriented digestive disease specialist through its emphasis on scholarly practice, teaching and research. The mission of the College is to serve the evolving needs of physicians in the delivery of high quality, scientifically sound, humanistic, ethical, and cost-effective health care to gastroenterology patients.

The ACG is committed to providing accurate, unbiased and up-to-date health information. Visit the ACG Web site www.acg.gi.org to access educational resources for patients and their families spanning the broad range of digestive diseases and conditions - both common and not-so-common. Organized by disease, state and organ system, these educational materials, developed by ACG physician experts, are offered for the information and benefit of patients and the public.

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