



Gastroesophageal Reflux Disease Causes and Its Effect on Human Body

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INTRODUCTION

Gastroesophageal reflux disease (GERD) is a stomach-related complication that occurs when acidic stomach fluids, as well as food and liquids, back up into the throat. GERD affects people of all ages, from infants to the elderly. People who have asthma are more likely to get GERD. Asthma flare-ups can cause the lower esophageal sphincter to relax, allowing stomach contents to flow back into the oesophagus, or reflux. Some asthma medications (especially theophylline) can help with reflux symptoms. Heartburn, on the other hand, can cause asthma by disrupting the airways and lungs. As a result, more genuine asthma may emerge in a dynamic manner. Furthermore, this stress might trigger hypersensitive responses, making aircraft routes more vulnerable to environmental factors like as smoke or chilly air.

DESCRIPTION

Gastroesophageal reflux disease (GERD) is a chronic, relapsing ailment that causes misery and has a negative impact on personal satisfaction. The disease is common, with a lifetime prevalence of 25 to 35 percent in the US population. The majority of the time, GERD may be diagnosed just only on the clinical signs. However, in some patients, the discovery may necessitate endoscopy and, in rare cases, wandering pH testing. The executives include lifestyle changes as well as pharmacologic treatment; obstinate sickness necessitates a medical surgery. The therapeutic goals are to manage adverse effects, recover esophagitis, and maintain abatement so that unpleasantness is reduced and personal satisfaction is increased.

Because newborns and children are unable to express their feelings, GERD can be difficult to detect, and indicators should be observed. Side effects could differ from those seen by adults. Continuous spewing, easy throwing up, hacking, and other respiratory difficulties, such as wheezing, are all symptoms of GERD in children. Inability to gain adequate weight, bad breath,

and burping are also common. Hopeless crying, refusing food, weeping for food and then taking off the jug or bosom to sob for it once again are all common. Children with GERD may experience one or more adverse effects; no single negative effect is common in all children with GERD. Up to 35 percent of the estimated 4 million newborns born in the United States each year may suffer with reflux, also known as 'throwing up,' in the first few months of their lives. By their most memorable birthday, around 90% of babies will have grown out of their reflux.

Individuals with severe, difficult-to-control GERD symptoms may benefit from medical intervention. It may also be explored for people who have respiratory issues such as asthma or pneumonia, as well as scar tissue in the throat. Some people who would rather not take medications for an extended period of time may choose for a medical treatment. Using camera-directed equipment, a medical procedure for GERD should be doable. This operation is referred to as a laparoscopic medical procedure. Laparoscopic surgery necessitates a smaller number of access points than traditional surgery.

CONCLUSION

Overabundance stomach tissue is deflated around the throat and stitched together in a method called Nissen fundoplication. This puts even more strain on the weakened esophageal sphincter. This activity appears to alleviate side effects, while it does not appear to be effective in treating corrosive impeding medications. Individuals whose side effects are not improving while taking caustic medicines may have a slower recovery time from a medical operation. Following a medical operation, some people have a bothersome side effect that lasts for a long time. The vast majority of people who undergo medical procedures, on the other hand, are extremely pleased with the results. Gulping problems, the runs, and an inability to burp or regurgitate to relieve bloating or sickness are all possible side effects.

Received:	01-March-2022	Manuscript No:	IPJCGH-22-13188
Editor assigned:	03-March-2022	PreQC No:	IPJCGH-22-13188 (PQ)
Reviewed:	17-March-2022	QC No:	IPJCGH-22-13188
Revised:	22-March-2022	Manuscript No:	IPJCGH-22-13188(R)
Published:	29-March-2022	DOI:	10.36648/2575-7733.6.3.13

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Citation Katthab OB (2022) Gastroesophageal Reflux Disease Causes and Its Effect on Human Body. J Clin Gastroenterol Hepatol. 6:13.

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ACKNOWLEDGEMENT

None

CONFLICT OF INTEREST

Authors declare no conflict of interest.