

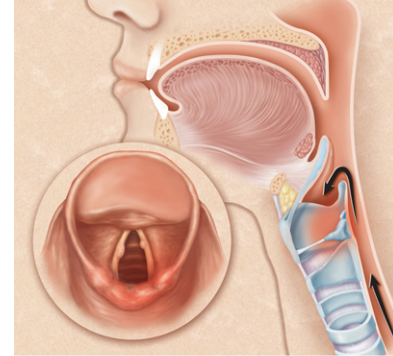


LARYNGOPHARYNGEAL REFLUX (LPR)



What is LPR?

Laryngopharyngeal Reflux Disease or LPR occurs when stomach acid travels up into your throat and affects your voice box. Many patients that have LPR affecting the throat do not feel heartburn or indigestion. Some refer to it as “silent reflux.”



What are the symptoms of LPR?

Common symptoms may include:

- Excessive or thick mucous / phlegm
- Feeling of something stuck in the throat (globus sensation)
- Frequent throat clearing
- Intermittent cough
- Hoarseness / voice changes
- Sore throat
- Post-nasal drip sensation
- Difficulty swallowing
- Decreased vocal range (for singers)

How do you diagnose LPR?

Most often, your doctor can diagnose LPR by examining your throat and vocal cords with a flexible scope. The voice box is usually irritated, swollen and sometimes red from acid reflux. This swelling and inflammation will eventually resolve with medical treatment, although it may take a few months.

How do you treat LPR?

Most of the time, LPR is well controlled with medications (Proton Pump Inhibitors, or PPI's). Behavioral modification can also significantly help reduce symptoms. Rarely, in severe cases that don't resolve with medication, other studies may be necessary for further evaluation.

How do I take my medication?

Medication Information: If you are taking a Proton Pump Inhibitor (PPI) such as the following: Nexium, Protonix, Prevacid, Aciphex, or Prilosec (omeprazole) **it is important to take your medicines about 30 MINUTES BEFORE A PROTEIN BASED MEAL!** Most of these medicines are given twice-a-day, so that will mean taking a pill before breakfast and dinner. The medicine is absorbed better if taken this way. It often takes a minimum of two weeks before symptoms start to improve; titration of the dose may also be necessary.



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Non-medical Treatment of LPR

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Many foods and drinks can make your symptoms worse, and eliminating them can help symptoms. In addition, being overweight, smoking, and drinking alcohol are all factors that worsen reflux disease. In particular:

Foods to Avoid

1. **CAFFEINE.** Decrease intake of coffee, tea, and caffeinated soft drinks. Soft drinks are very acidic (pH of 2.3), and carbonation can lead to belching and further reflux of acid into the throat. Other acidic juices (orange, grapefruit, cranberry) can worsen reflux.
2. **CHOCOLATE AND MINTS.** (These relax the sphincter muscle that keeps acid in the stomach)
3. **ALCOHOL,** especially in the late evening and before bedtime.
4. **FRIED, FATTY, AND SPICY FOODS,** can all exacerbate reflux.
5. **EAT AT LEAST 3 HOURS BEFORE GOING TO BED.** Eating a heavy meal and then laying flat increases the chance of acid reflux.
6. **TAKE THE MEDICINES YOUR DOCTOR HAS PRESCRIBED FOR YOU** In most cases, your doctor will prescribe a "proton pump inhibitor" drug (PPI) such as Omeprazole, Nexium, Prevacid, Protonix, Prilosec or Aciphex. These drugs are typically prescribed for TWICE A DAY, which is more often than for routine heartburn.
7. **ELEVATE THE HEAD OF YOUR BED 4-6 INCHES** If your symptoms are worse in the morning, (indicating active reflux at night) this step is important. Placing several pillows under your head may be another option.