



Laryngopharyngeal Reflux (LPR)

What are GERD and LPR?

Gastroesophageal reflux disease (GERD) occurs when acid from the stomach backs up into the esophagus.

During GERD, the contents of the stomach and upper digestive tract may reflux (back up) all the way up the esophagus and into the throat and even the nasal airway. This is known as laryngopharyngeal reflux (LPR), which can affect anyone.

In some cases, reflux can be “silent”, with no heartburn or other obvious symptoms until a problem arises.

What are the symptoms of LPR?

Adults with LPR often complain that the back of the throat has a bitter taste, a burning sensation, or something “stuck”. Some patients have hoarseness, difficulty swallowing, frequent throat clearing, and difficulty with a sensation of drainage from the back of the nose (“postnasal drip”). Some may have difficulty breathing at times. Many patients with LPR do not experience heartburn.

How is LPR treated?

Most people with GERD or LPR respond favorably to a combination of lifestyle changes and medication. Medications that could be prescribed include antacids, histamine antagonists, proton pump inhibitors (PPIs) or pro-motility drugs. Some of these products are now available over-the-counter and do not require a prescription.

Adult lifestyle changes to prevent LPR

- Avoid eating and drinking within 2-3 hours prior to bedtime.
- Do not drink alcohol
- Eat small meals, and eat slowly
- Limit foods that can cause increased acid production or promote reflux, such as:
 - Caffeine, carbonated drinks, chocolate, peppermint, tomato, citrus fruits, fatty & fried foods
- Lose weight. Excess weight around the mid-section can put pressure on the stomach and promote reflux.
- Quit smoking. Nicotine can increase stomach acid production and promote reflux.
- Wear loose clothing to take pressure off of the mid-section.

[adapted from The American Academy of Otolaryngology – Head & Neck Surgery website: www.entnet.org]

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