

# Laryngopharyngeal Reflux

## What is Laryngopharyngeal Reflux (LPR)?

Acid is normally produced in the stomach. It is prevented from backing up or refluxing into your esophagus (or food pipe) and throat by a band of muscle at the entrance of the stomach known as the lower esophageal sphincter. If this muscle is not functioning well, acid can back flow into your esophagus and into your throat and voice box, this is called laryngopharyngeal reflux.

## But I don't have Heartburn?

Many people with LPR do not have symptoms of heartburn. Compared to the esophagus, the voice box and the throat are more sensitive to acid. Acid in the throat and voice box will cause prolonged irritation and symptoms of LPR.

## What are the symptoms?

The symptoms may include dry cough, chronic throat clearing and a sensation of something being stuck in the throat. Only about half of patients with laryngopharyngeal reflux experience heartburn.

- Hoarseness or voice changes
- Thick or excessive mucous/phlegm
- Chronic throat irritation or sore throat
- Frequent throat clearing
- Heartburn
- Chronic dry cough
- Feeling of a lump in the throat
- "post-nasal drip"
- A bad taste in the mouth (mornings)

## What to expect at the Doctor's Examination?

A head and neck examination will be performed. Particular attention will be placed on the nose and throat area. The doctor will use an instrument called a Flexible Fiberoptic Laryngoscope. This is a camera with a thin flexible lens which allows the doctor to look at your voice box and throat. If the area is very inflamed and red, you might have LPR.

Sometimes if the symptoms of LPR are very severe or if the symptoms fail to resolve with medical treatment your doctor might order a test called 24-hr pH Monitoring to verify the diagnosis. This test involves inserting a tiny tube through the nose into your esophagus. This tube monitors the amount of acid that backs up into your esophagus and throat.

## What treatment will the doctor recommend?

- Weight reduction
- Diet modifications
- Medications to reduce stomach acid
- Sleep with head of bed elevated
- Sometimes surgery

## How long do I need Medication?

Most patients will begin to notice some improvements after 2 weeks. However, the medication should be continued for at least 2 months. If the symptoms completely resolve, the medication can then begin to be tapered. Some people will remain symptom-free without the medication. Other people may have relapse of the symptoms, requiring further treatment.

## Things that you can do to prevent reflux

- Do not smoke. Smoking will cause reflux.
- Avoid tight fitting clothes around the waist
- Avoid eating three hours prior to bedtime. Avoid eating large meals or gorging.
- Weight loss
- Foods to avoid: caffeine, cola beverages, citrus beverages and mints, alcoholic beverages, particularly at night, cheese, fried foods, eggs and chocolate.
- Sleep with the head of the bed elevated. Six inches of bed elevation will decrease reflux significantly.