Heartburn
Nutrition Fact Sheet

**Heartburn**, also known as acid indigestion, is a burning sensation in the chest or throat. It has NOTHING to do with the heart – it is a digestive problem. It is also a common symptom of Gastroesophageal Reflux Disease (GERD), which is defined by the National Institute of Diabetes and Digestive and Kidney Diseases as heartburn occurring more than twice a week. If you are experiencing these symptoms, discuss it with your doctor.

**Symptoms**
- A burning chest pain which starts centered around the heart area and moves up toward the throat
- A feeling that food is coming back into the mouth
- An acid or bitter taste at the back of the throat
- An increase in pain level when lying down or bending over

**Why Heartburn Happens**
The pain associated with heartburn occurs when stomach acid backs up into the lining of the throat (esophagus). Normally, the lower esophageal sphincter (LES) - a muscle located at the bottom of the esophagus - opens to let food enter the stomach, then closes to keep acid from flowing back up into the esophagus. When the LES weakens, stomach acid flows into the esophagus causing tissue damage and pain.

**Common Factors that are Related to Heartburn or Symptoms of GERD**
- Citrus fruits, juices, chocolate, peppermint, spearmint, tomatoes or tomato products, raw onions, garlic, black pepper, vinegar, and spicy foods
- Caffeinated beverages such as coffee, soda and energy drinks like 5 Hour Energy, Full Throttle and Monster Energy
- Alcoholic beverages
- Fatty foods
- Eating or drinking large portions of food
- Eating or drinking too quickly
- Lying down within 2 hours of a meal
- Being overweight
- Stress
- Pregnancy
- Hiatal hernia (stomach into diaphragm)
- Smoking
- HIV medications
- Some medications to treat high blood pressure, heart disease, depression, insomnia, anxiety and asthma

**Complications of Heartburn:** Heartburn can disrupt sleep and make eating difficult. Chronic acid injury to the airway leading to the lungs and/or esophagus can lead to respiratory infections, scarring of the lower esophagus, ulcers, and esophageal cancer.

For more information or fact sheets contact:
Janelle L’Heureux, MS RD
213-201-1556 or jheureux@apla.org
aplahealth.org
© 2018 APLA Health
Preventing Heartburn: Treatment options include both lifestyle modifications and medications.

**Tips to Reduce Heartburn**

- Avoid foods and beverages that can trigger heartburn
- Don’t overeat - stop before you are full
- Stay upright for 2 hours after eating
- Raise the head of your bed 6 to 8 inches (use blocks)
- Avoid tight fitting clothes
- Lose weight if you are overweight
- Quit smoking

**Medications**

Over-the-counter and prescription medications are available to treat heartburn. However, many of them have been found to interact with HIV medications, and especially with protease inhibitors. This affects what, when, and how to properly take antacids. Antacids that interfere with HIV medications include Tums, milk of magnesia, H2 receptor agonists, and proton pump inhibitors. Make sure to discuss all heartburn medications you are taking with your doctor and pharmacist (even if they are over-the-counter).

**Key Points to Remember**

- Do not ignore frequent heartburn — speak with your doctor.
- Make changes in your diet and lifestyle to see if heartburn improves.
- If heartburn continues after the use of medications and/or lifestyle changes, let your doctor know. You may need to be referred to a specialist.

**How Does a Heart Attack Differ from Heartburn?**

A heart attack occurs when the blood supply to part of the heart muscle is restricted or stopped, usually by blocked or narrowed arteries. Heartburn is a symptom of pain felt as a result of acid indigestion.

Call emergency services immediately if you experience any of these symptoms:

- Intense pressure or crushing pain in the chest that may extend into the arms, neck or back
- Moderate chest pain, tightness, pressure or vague discomfort
- Feeling faint, dizzy, or weak
- Difficulty breathing or swallowing
- A feeling of severe indigestion that doesn’t go away after taking an antacid

**For more information or fact sheets contact:**
Janelle L’Heureux, MS RD
213-201-1556 or jlheureux@apla.org
aplahhealth.org
© 2018 APLA Health