

Reflux Remedy Report

A man and a woman are running on a beach, splashing water. The man is in the foreground, wearing a dark jacket and shorts, with his arms outstretched and a peace sign. The woman is behind him, wearing a black tank top and light-colored shorts, with her hair blowing in the wind. The background shows a sandy beach with rocks and the ocean under a bright sky.

**Fast, Safe & Natural
Home Remedy Information**

RefluxRemedy.com

Reflux Remedy Report

Heartburn, Acid Reflux, Bile Reflux, Hiatal
Hernia & Barrett's Esophagus Relief
Fast, Safe & Natural Home Remedy Information
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Thank you for purchasing your exclusive copy of the Reflux Remedy Report

In this report, you will learn exactly how to cure your heartburn, acid reflux, bile reflux, hiatal hernia & Barrett's Esophagus using safe, natural and easy home remedies.

Many of our customers have successfully cured their ailments using our natural remedies, and we are very excited to hear all the numerous success stories that flood our email every week. But sometimes we received emails from people who tried our remedies without any success.

So I decided to add more content to the original Reflux Remedy Report.

Here's what I did. I emailed our customer list asking people to report back to us, sharing what helped, and what didn't. And the feedback we received was amazing... and I'm going to share it all with you in this report!

This report is now the 3rd version of the report, and contains a wide spectrum of information, tips, ideas and remedies that should help 99% of our customers find relief from their problems.

Our goal is for you to be 100% satisfied and 100% cured of your heartburn & reflux symptoms, without using any more drugs.

If you try these remedies and do not successfully achieve better health, we certainly will refund your purchase price promptly. Simply send an email to support@refluxremedy.com and let us know.

We want to hear from you!

If you try these remedies and DO achieve better health, we certainly want to hear about it! We would love to hear your success story! Please email us at support@refluxremedy.com and share your good news! Also, please let us know if we can share your story with others on our website – RefluxRemedy.com

Disclaimer:

The material in this report is provided for educational and informational purposes only, and is not intended to be a substitute for a health care provider's consultation.

Please consult your physician or appropriate health care provider about the applicability of any opinions or recommendations with respect to your own symptoms or medical conditions.

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The Reflux Remedy Report

Thank you for purchasing the Reflux Remedy Report. You are on your way to healing your reflux naturally! I must preface this report with a slight caution – the report has become somewhat unorganized... but if you consider this is a “living” report (it keeps growing with helpful information), hopefully you will see the value in it and forgive the lack of “perfect flow”. So my advice is to read the whole thing carefully, and put it to good use!

Get Rid Of Heartburn With These Simple Cures!

Without further ado, here is exactly what you need to do to get rid of your heartburn, acid reflux, bile reflux, hiatal hernia &/or Barrett’s Esophagus problems (read each step carefully):

1. **Eat Soft Foods For 2 Days** - First of all, for a period of 2 days or so, you should ideally prepare your body to heal your esophagus from any prior damage that may have been caused from excessive acid in the past. To do this, you’ll need to stop eating any crunchy foods such as nuts, crackers, toast, popcorn, cookies, breakfast cereals, etc. Crunchy foods make your situation with heartburn worse by scratching your Lower Esophageal Sphincter (LES). You can help heal this part of your body by eating only soft foods for a couple days, allowing your LES to “rest”.
2. **Avoid Spicy Foods & Acidic Foods for 2 Days** – spicy and acidic foods can aggravate your LES and cause heartburn. To prevent this from happening, stay away from these foods, as well as alcohol, beer, and carbonated soft drinks.

3. **Stop Smoking** – If you smoke, you should stop smoking for at least 2 days. The chemicals found in tobacco cause your LES to relax, contributing to more acid and fumes leaking into your esophagus. Smoke will also irritate your throat. We highly recommend a total cessation of smoking. (If you need help quitting, please visit www.SmokingCure.com)

4. **Limit Coffee Intake** – Try to cut back on your coffee consumption to one cup per day. You might find that coffee gives you pain, as it does for many others. Cutting coffee out for a few days will help heal your esophagus. If you can't quit drinking coffee, drink a glass of water afterwards to cleanse your throat from any acidic residue.



5. **Drink Water After Every Meal** – After every meal, wash down your food with a tall glass of water. This has many benefits besides how it helps prevent heartburn. This should be done from now on, as part of your daily routine. Water is good for your body, and is helpful to maintain good overall health. Water helps cleanse the LES so it closes up tighter, not allowing gases and acid to leak up into your esophagus, causing pain.

6. **The Secret Ingredient: RAW, LIQUID HONEY** – Raw honey in liquid form is really what helps get rid of your heartburn for good. We suggest taking 1 tsp. of raw liquid honey any time you begin to feel discomfort of heartburn or acid reflux. You can also take the honey before bedtime, which will help soothe your esophagus and allow you to heal while you are sleeping.



***Important note – honey should not be given to infants or children under the age of 3. It can cause serious problems, even leading to death.*

Honey works fast, and it's important that you use pure raw honey. (This is the most common type of honey you'll find at the grocery store – in liquid form... like in those “Honey Bear” plastic bottles, for example). Honey has long been known to fight bacteria, block infection, combat inflammation, reduce pain, and improve circulation. It also stimulates the regrowth of tissue – in fact, there are some people who claim a certain blend of bee powder and honey cures baldness!

7. **The Other Secret Ingredient: APPLE CIDER VINEGAR (ACV)** – Did you know that most acid reflux is actually caused by too LITTLE acid in your stomach? This makes sense when you think about how it works. If your stomach isn't producing enough acid to digest your food, then more food (and gas) will stay in your stomach for longer periods of time... without getting properly digested. So, since Apple Cider Vinegar is so acidic, it immediately starts digesting the food in your stomach and eases your heartburn very quickly.



***Please note – some people have reflux because of too much acid. If this is your case, then the Apple Cider Vinegar will probably not help you. If you currently take medications that are acid blockers, you probably have too much acid already. If you don't know, please consult with your doctor.*

How much Apple Cider Vinegar should you use?

First of all, it won't take very much at all. One or two "swigs" should do it (one or two teaspoons). You'll probably feel a slight burning sensation for maybe 5 seconds, but then it should go away and you'll notice almost immediate relief. And it should keep you relieved for days at a time.

Another tip is to try and get the best apple cider vinegar you can – we recommend you find some at a health food store, not the cheap Heinz brand found at grocery stores. Some grocery stores will have the good kind – you'll know it when you see it. The Bragg brand has worked really well, and it usually costs less than US\$5.00. But if you don't find Bragg or another organic APPLE CIDER VINEGAR brand, Heinz should work better than nothing.

For more information about Bragg Apple Cider Vinegar, click here:

http://www.bragg.com/FAQ/faq_applecider.html

Here is another great resource for learning about additional benefits (and a few warnings) about Apple Cider Vinegar:

<http://www.earthclinic.com/Remedies/acvinegar.html>

Honey and Apple Cider Vinegar together should help you tremendously!

We recommend trying just the honey first. If that doesn't work, try adding some honey to two or three teaspoons of APPLE CIDER VINEGAR in a cup of hot water. If that doesn't work, try using the APPLE CIDER VINEGAR straight – one swig at a time. The taste of APPLE CIDER VINEGAR isn't very good, but it should help you get rid of your reflux/heartburn.

For the first 2 days, you'll want to remember to eat soft foods only, like bread, soup, cooked veggies, soft fruits, eggs, mashed potatoes, pasta (without tomato sauce which is acidic), pudding, yogurt, cooked rice, and anything else that isn't crunchy and doesn't contain any acid.

Following the above remedy, you should be able to cure your heartburn within just a few days!

After a few days of eating this restricted diet, you can go back to eating any foods you like – even if they're crunchy and acidic!

Another tip – be sure to chew your food thoroughly! The more you chew, the softer your food gets... and the softer your food, the less harsh it will be to your esophagus and LES.

If you find that you are still suffering from heartburn or reflux after modifying your eating habits, we recommend seeing a doctor to make sure a more serious problem does not occur, and to receive more thorough examination and treatment.

However, it would still be good for you to follow the advice in our report from now on.

Remember, if you do start to feel any discomfort or heartburn, just take a teaspoon full of honey and that should end your discomfort.

For more information about the benefits of honey, you can check out this excellent comprehensive honey resource:

<http://www.nhb.org/health/MedTechReports.html>

Alternatives to Honey & ACV

If for some reason you are unable to consume honey or apple cider vinegar, one alternative we recommend using Aloe Vera. This can be found in a variety of places, particularly in health food stores.

Honey and Aloe Vera help your body heal itself naturally. For many, there is no need for you to take prescription drugs or medications to mask the symptoms of your problems.

We believe God has provided His creation with the resources necessary to remain healthy and pain-free.

The Apple Cure!

I (Bob) once suffered from esophageal reflux. After years of suffering, and sleeping with my head propped up on 3-4 pillows, I was blessed to discover on my own a home remedy.



As promised, here is the exact brand of apple that has helped me personally get rid of my reflux problem: **Red Delicious Apples!**

Every night before bedtime, I would eat a slice of an apple, and that would get me through the night. You don't need a whole apple, usually.

If a half of an apple doesn't work for you, two or three apples probably won't work either. It works for many people with reflux problems, but not all... and I hope it helps you.

If it doesn't work for you, don't worry... the honey & apple cider vinegar remedy, along with drinking a glass of water after every meal, and healing your body for 2-3 days without eating any crunchy foods, should work just fine for you.

Natural Medicines

While Western medicine has become the norm in many cultures, it is not the only treatment option. Conventional western medicine, often called allopathic medicine, is the system of medicine taught at most medical schools and most pharmaceutical and synthetic medicines are manufactured and marketed according to the principles of allopathic medicine. Allopathic medicine is also sometimes called orthodox medicine.

Because most of us in the Western world have grown up in a society in which allopathic medicine is the prevailing norm, we forget that, only a few decades ago, homeopathic, herbal and other natural medicines were commonly available – and freely used even by conventional doctors.

While there are often heated debates about which system of medicine is ‘better’ than the other, many responsible doctors (whether they are allopathic or not) recognize that both have a role to play in the treatment program.

Natural medicine has often been frowned on by conventional doctors, especially by those who did not have sufficient knowledge of these medicines. However, it is encouraging to note that some medical schools are now beginning to re-introduce it into their course work, thereby providing doctors with a wider range of treatment options from which to choose. In many countries, especially in Europe, India and China, natural and homeopathic medicines are commonly prescribed by conventional doctors and represent a significant part of the total annual drug sales.

Naturopathy is a branch of medicine (just as allopathy is a branch of medicine), which operates according to the underlying philosophy that the body has an innate capacity to heal itself. While natural medicines are often called ‘alternative’ or ‘complimentary’ medicines, they are, in fact, a unique and independent form of medicine in their own right, well able to treat a variety of conditions.

Perhaps the term 'holistic' medicine is more apt, given the broad range of treatment options and approaches which are to be found within the practice of natural medicine, which encompasses many different disciplines, including herbalism, homeopathy, iridology, osteopathy, chiropractic, therapeutic massage techniques, aromatherapy, acupuncture and many, many more. Most naturopaths will use a variety of treatment modalities in order to treat their patients in a holistic way to support health, relieve symptoms and prevent future disease.

In fact, even the World Health Organization defines health as being "... more than simply the absence of illness. It is the active state of physical, emotional, mental and social well-being." This is a wonderfully clear description of holistic or natural medicine, which strives to support health (thereby relieving or preventing symptoms), rather than simply eliminating disease.

Although allopathic medicine certainly has a role to play and has made a tremendous contribution to medical science during the past century, there is a growing perception that it is not the only answer and that, in many cases, holistic medicine can accomplish just as much, if not more – without the risk of side effects, addiction and sacrifice to health so commonly associated with pharmaceutical drugs.

Contrary to common perception, and provided that they are manufactured in the correct way, natural medicines can work quickly and safely to promote healing. In many cases, they can succeed where pharmaceutical drugs have failed. Despite frequent reports that they are 'unproven' and 'untested', the opposite is true.

Natural medicines have a long history of usage and there is a wealth of empirical evidence to support their effectiveness and safety. In addition, many academic hospitals and universities to support the extensive traditional and empirical evidence behind natural medicines carry out active clinical research.

It is also important to know that, like any medicine, herbal and homeopathic medicines must be manufactured in the correct way, following acceptable procedures and manufacturing methods to ensure maximum effectiveness and safety.

Due to the recent rise in popularity of natural remedies, many companies have sprung up to take advantage of the market. Unfortunately not all of them are equipped to manufacture to the correct standards, often resulting in a flood of inferior (and sometimes even unsafe) remedies onto the market – and giving natural remedies a bad name.

Even some pharmaceutical companies have rushed to claim their market share by producing so-called ‘standardized’ extracts of herbs and offering these as superior to the tried and tested methods of naturopathic manufacturing. Nothing could be further from the truth. While ‘standardized’ extracts may offer benefit of easy consistency of dosage (and cheaper more efficient production lines), they have grave disadvantages.

These include an increase in side effects as the medicines produced in this manner lose the natural protective properties of the herbs. In some cases, these side effects have proved fatal – as was seen in the liver toxicity associated with standardized extracts of kava kava, a herb previously safely used for generations without any known side effects.

Most naturopaths recommend what is called the Full Spectrum Method of extraction – which retains the benefits of ALL the active ingredients within the herb as opposed to isolating only one – thereby providing a more complete treatment as well as superior protection against side effects.

Whatever your choice, always choose wisely. Research what is best for you. If you have a chronic or life threatening condition, don't make changes without first discussing them with your doctor in order that your condition may be monitored.

Well informed and supportive practitioners will support patients who want to take responsibility for their own health.

In the treatment of acid reflux, the following herbal and homeopathic remedies are often used as part of the treatment plan.

DigestAssist & Gastronic Dr. - <http://www.refluxremedy.com/digestassist>

Recognizing the need for a healthier and more effective approach, without the side effects of the prescription drugs, Native Remedies has developed Gastronic Dr. and DigestAssist - both 100% herbal remedies containing well researched ingredients and manufactured in therapeutic dosage according to the highest pharmaceutical standards.

Gastronic Dr. is a capsule which is used every day for the digestive tract and as a preventative for flare ups of stomach and digestive disorders such as IBS, Crohn's Disease, Gastritis, Acid Reflux (GERD), Ulcerative Colitis and Diverticulosis.

Gastronic Dr. safely and effectively acts to improve digestive health, reduce inflammation and reduce and prevent digestive disorders.

DigestAssist, the perfect companion to Gastronic Dr., can be taken as needed to quickly put an end to symptoms of heartburn, nausea, gas, indigestion, and acid reflux. If symptoms such as gas, cramps and/or heartburn flare up (e.g. after eating the wrong food) a few drops of DigestAssist will soothe the symptoms away.

DigestAssist contains the following therapeutic herbs in convenient and fast- acting drop format:

Zingiber officinale, commonly known as Ginger, has a long history of medicinal use in traditional Chinese and Ayurvedic (Indian) medicine.

Modern research confirms its effectiveness in relieving the symptoms of nausea, vomiting, indigestion, flatulence and dizziness. Working mainly in the digestive tract, Zingiber boosts digestive fluids and neutralizes acids, making it an effective alternative to anti-nausea medication, but without the usual unpleasant side effects. Zingiber has strong anti-inflammatory and pain relieving properties and is also used to treat arthritis and other inflammatory diseases.

Foeniculum vulgare, also called fennel, was a favorite herb in medieval times and was used to stop stomach rumbles and colic. It was commonly used after meals to prevent flatulence, indigestion, colic and other digestive problems. Fennel has strong calmate and anti-inflammatory properties.

Mentha piperita, one of the most effective of the mint herbs, has been used for centuries to relieve indigestion, nausea and heartburn. Modern research has demonstrated its effectiveness in soothing the symptoms of diverticulosis, IBS and other digestive disorders. Mentha piperita is widely cultivated for medicinal uses and also has anti-inflammatory and anti-spasmodic properties. It relaxes the muscles of the digestive tract and stimulates the flow of natural digestive juices and bile, thereby assisting healthy digestion.

Pelargonium graveolens, also known as 'maagpyn bossie' (stomach pain bush) is a traditional medicinal herb used by indigenous people of South Africa. It has a wide variety of uses and is an effective calmate and anti-spasmodic herb, reducing stomach cramps and pain.

Gastronic Dr. contains the following therapeutic herbs in a 100% vegetable capsule:

Matricaria recutita, also known as German Chamomile, is a medicinal herb which has been used by European naturopaths for centuries. Its anti-inflammatory, anti-spasmodic and calming properties make it an extremely effective treatment for digestive disorders.

Filipendula ulmaria, or Meadowsweet, is an anti-inflammatory, soothing digestive remedy which helps to protect the digestive tract and reduce stomach acid secretions. It is also effective in reducing the pain of digestive disorders and ulcers and is similar in structure to the synthetic drug called acetylsalicylate, or aspirin - without the side effects commonly associated with aspirin.

Ulmus fulva, or Slippery Elm, is one of the most effective herbs used in reducing digestive pain and irritation and also protects and soothes the lining of the stomach and digestive tract due to its high mucilage content. Only bark from top quality Slippery Elm is used in Gastronic Dr.

Sutherlandia frutescens, also known as 'Cancer Bush' or 'Kankerbossie' is a medicinal herb exclusively found in Southern Africa and has been used by indigenous people for thousands of years to treat chronic and acute digestive complaints, internal cancers and as a powerful tonic. Recent research has confirmed its adaptogenic properties. Sutherlandia contains a number of highly active compounds, including pinitol, L-canavanine and the amino acid, GABA. L-canavanine is a strong L-arginine antagonist that has documented anti-cancer and anti-viral activity (Swaffer et al. 1995, Crooks and Rosenthal, 1994, Ostlund and Sherman, 1996)

Triple Complex Digestion Tonic

Tissue salts are nutritional substances which are used to maintain optimal health and functioning and also to restore balance and relieve symptoms of disease. They can be taken regularly to prevent illness and improve functioning (just like vitamins), but can also be used to treat symptoms when this is necessary (as one would do with medicines). The only difference is that they are taken more frequently to treat symptoms and less frequently as a preventative and a health aid.

Triple Complex Digestion Tonic - <http://www.refluxremedy.com/tonic>

Triple Complex Digestion Tonic is the perfect companion to our Gastronic Dr. & DigestAssist for people suffering from Crohn's Disease, IBS, chronic heartburn and gas, Diverticulosis, spastic colon and other digestive disorders.

Triple Complex Digestion Tonic contains Kalium phosphate, Natrium phosphate and Calcium phosphate and can be used to promote healthy digestion by anyone with digestive disorders and complaints.

Helpful Feedback From Our Customers

Ever since releasing my Reflux Remedy Report, I have continued to research heartburn and acid reflux, and I have received valuable feedback from a few of my customers. Here's one recent email I received, that I hope will help you:

My Strategy

"What helps me with my reflux is the following:

1. I drink almost no liquid with meals. It tends to dilute the stomach acid
2. I take digestive enzymes capsules and apple cider vinegar pills (1 of each) with each meal. I also take an extra enzyme pill if I have a particularly heavy meal. (You can purchase digestive enzymes from multiple places).
3. I take a spoonful of honey just before bed
4. I try to slow down when eating and chew my food thoroughly I have concluded, based on reading the work of others, that the problem for most people with reflux is actually "too little" acid. As we get older our bodies slow down their acid production - ever notice that it is very rare for a young person to have reflux? The reflux most people experience is probably gaseous eruption caused by poorly digested food. I do drink lots of liquid but not for at least 30 minutes after a meal. I do use just enough liquid to swallow the capsules I mentioned.

THIS TOGETHER HAS TOTALLY RID ME OF A 3 YEAR NEXIUM HABIT. I FEEL MUCH BETTER THAN I HAVE IN YEARS AND IT COSTS ME LESS THAN I WAS PAYING BEFORE ON INSURANCE CO- PAYS AND MY INSURANCE COMPANY DOESN'T HAVE TO PAY ANYTHING. THAT MEANS I'M NOT CONTRIBUTING TO THE SPIRALING COST OF HEALTH CARE. BTW - I ALSO DON'T GET CONSTIPATED VERY OFTEN ANY MORE. BONUS!"

Braggs – My Story!

"Well.....after being a slave to Zantac for over 10 years due to otherwise constant heartburn, I tried your remedy with a little hope of success. However I am delighted, amazed, elated to report that from the very first day I tried the honey/acv formula, my heartburn is gone! After a little trial and error I found that a teaspoon of honey mixed with 2 teaspoons of acv (I used Bragg's) in a little warm water after each meal virtually eliminates even the slightest symptoms. I have an extra teaspoon of honey before bed and have, unbelievably, completely acid-free sleep! Even if I eat late, which is just incredible. I have found that I can eat and drink pretty much anything, although unfortunately beer is still a bit of a killer, but wine and spirits are fine (thank God!) Anyway it's still early days yet but THANK YOU SO MUCH!! It feels fantastic to be using such a pure and natural remedy. I really feel if it can work for me then it should work for just about anyone."

ACV Brand for Europeans... and help quitting smoking

Here is a helpful email from a nice man in Hampshire, England:

"Dear Mr. Barton,

I have tried your Organic Cider Vinegar remedy.

Here in England a popular brand that can be found in most supermarkets is Aspell's.

I have been taking it for a few months now when I get an indigestion twinge.....usually just before I go to bed. I Knock back a tablespoon full closely followed by washing my mouth out with several swigs of water to protect my teeth. I usually then take a teaspoon of honey to quiet everything down.

Whereas previously I was taking 2 to 3 Pepcid AC tablets a day, now I tend to take the Cider Vinegar max once a day, and quite often none for 2 or 3 days.

I can often eat quite spicy food late at night and everything is ok.

I have found that if I eat slightly smaller portions I am less likely to suffer indigestion.

I have also found, strangely, that giving up smoking seems to have been made easier whilst taking the Cider Vinegar.

One remedy I was told by my Grandmother which tends to work for mild indigestion is taking a couple of tablespoons of raw wheat germ with a glass of water. This doesn't always seem to work for me, but I'm sure it would for some people.”

Milk and 7-Up

Mix a half glass of milk with a half-glass of 7-Up and drink.

This is a "home remedy" that some nurses "secretly" use at hospitals to help relieve symptoms of acid reflux & heartburn. (They don't do this under doctor's orders by any means... but it often works).

Also, I would assume that Sprite or Sierra Mist (or a similar beverage) would work just as well in place of 7-Up.

Pectin & Grape Juice

"What has been helping me is a 1/2 spoonful of pectin and one to two ounces of 100% Grape Juice. This has immediate results. Maybe this might help someone also."

This remedy helped this person, despite the honey & ACV not working for her... so maybe this will help you, too.

South Beach Diet

Another customer success story:

"I just realized that the South beach diet (cutting out carbs and sugars) TOTALLY rid me of acid reflux. That might be good for your book! Thank you -Kurtis H."

The Weird Remedy - For Hiatus Hernia Sufferers

Some people who *think* they have acid reflux, actually have a condition called hiatus (or hiatal) hernia.

The above remedies should help hiatus hernia & Barrett's, but there is more you can do as well.

Here's a unique method I found on the internet, that you may want to try:

"It's gonna sound crazy, but please try it and let me know if it works for you. The approach I took was a totally mechanical one. I'll explain my thinking and my results, if you'll bear with me.

1. I was having severe, constant reflux and little stuck burps for two weeks. Nothing seemed to help. I was taking Pepcid Complete twice a day, and it wasn't doing anything.
2. I remembered a doctor friend of mine saying (during a casual phone call) "Gee, maybe you have a hiatal hernia."
3. I looked up hiatal hernia on the web. Seems like it's not considered a big deal, in and of itself, unless it causes other problems (like reflux).
4. I took a look at a picture of a hiatal hernia, and I read about how the lower esophageal sphincter uses intra-abdominal pressure to close itself. When it gets pushed up above the diaphragm, no pressure. So it doesn't close. So, reflux.
5. I thought... "How can I get that sucker back down there?"

6. Here's what I do. I drink a glass of water or eat an apple (to get some weight in the stomach). I put my forearms on top of my head. I jump up and down, and every time my feet hit the ground I exhale sharply to raise the diaphragm a little. What I'm trying to do is shake the stomach back through the hiatus.

It sounds crazy, but it's been working pretty well for me. I'm hoping a few other people will try it so that I can see if it works for them too. It's important to do all the steps at once-- it doesn't seem to work if you leave one out.

Hiatal Hernia Tips

Here's some feedback from a customer with hiatus hernia:

“Hi Joe, I have a hiatal hernia with GERD. I did try your suggestions and these are my results:

1. I drink a teaspoon of apple cider vinegar with a little honey (in hot water) each day. It really keeps the pain at bay.
2. I eat a delicious apple each day. I find that eating the apple will quell any pain that might be bubbling up.
3. I've tried the "arms raised" technique and find it really works. I've experienced a constant soreness right where the hernia is, just at the base of my left rib cage, toward the center of my chest. When I do the technique twice a day, this soreness goes away.
4. Just eating honey didn't do anything.

There you have it! Thank you so much - your report was a lifesaver.”

Green Tea with Ginseng

“The Honey definitely helped. Another item that I highly recommend to add to the list is Green Tea with Ginseng and especially the Turkey Hill Brand which also contains honey. It has worked wonders.”

Raising Your Bed and Sleeping on your Side

A lot of people have said that it helps to raise their heads at night while sleeping. You can do this with pillows, or putting wooden blocks under the head of your bed (about 6-7 inches).

This helps keep the acid in your stomach lower than your esophagus. You could also try to sleep on your left side, as your stomach is tilted the other way and less acid will creep up if you're on the left side.

Chewing Gum

A few of my customers have reported that chewing gum after meal has helped tremendously. I would assume this is because more saliva is produced, which helps aid digestion.

Baking soda and water

Another thing to try if you have hiatus hernia (which helped a customer who wasn't helped by any of the above remedies):

“... mixing a teaspoon of baking soda with water and drinking it...that seems to help a bit...sometimes....”



This makes sense because baking soda helps raise the pH level in your body, for less acidity and a more alkaline balance – which is good for your overall body health.

Conclusion

As you can see, each individual is unique, and each person must do a bit of experimenting in order to find what works best. I suggest that you keep this report handy, and try a combination of the above remedies until you find something that works best for you.

It might be honey & apple cider vinegar that does the trick. It might be chewing your food more and not drinking soda during your meals. It might be lowering your carb intake with the South Beach Diet, or it might be simply chewing gum after meals.

The key is for you to not give up! Something should work for you, and should get you off of drugs!

Again, we are not doctors, and do not pretend to have all the answers... but we do believe our report will help you, and we hope you find quick relief and a lifetime of good health! As always, we remain...

Yours for excellent health,

Joe & Bob Barton

Barton Publishing Inc. RefluxRemedy.com

p.s. We want to hear from you! After giving our remedies a try, please send us an email and let us know your success story! Email support@refluxremedy.com

Heartburn & Reflux Remedy Report Summary

1. Eat soft foods for 2 days
2. Avoid spicy & acidic foods for 2 days
3. Stop Smoking
4. Limit Coffee & Caffeine Consumption
5. Drink Water after every meal
6. Swallow 1-2 Teaspoons of Raw, Liquid Honey when symptoms begin
7. Use 1-2 Teaspoons of Organic Apple Cider Vinegar, or combine with honey
8. Chew your food longer
9. Aloe Vera juice may help
10. Red Delicious Apples may help
11. Chewing Gum may help
12. Baking soda mixed with water may help
13. Green Tea with Ginseng may help
14. Milk & 7-Up may help
15. Pectin & Grape Juice may help
16. South Beach Diet may help
17. Don't drink soda with your meals
18. Don't give up! Find what works for you!

Gastroesophageal Reflux Disease (GERD): Explained

Any valuable discussion of acid reflux needs to include a section devoted to a better understanding of the disease, including the leading causes and resulting conditions attributed to the ailment. Educating yourself as to the causes, symptoms, and effects of your disease will equip you with the knowledge you need to intelligently chart your path to health.

For our purposes, we'll be taking a closer look at what exactly acid reflux or gastroesophageal reflux disease (GERD) is. Additionally, we'll take review how hiatal hernia can lead to GERD and such conditions as Barrett's Esophagus, a dangerous form of cancer that can result in patients with long-term GERD.

What is GERD (acid reflux)?

At its most basic, Gastroesophageal reflux disease (GERD), or acid reflux, is a condition where the stomach backs up (refluxes) and the liquid content contained within it returns to the esophagus.

If the liquid were something like water, there'd be no problem. However, the liquid most often contains acid, pepsin (an enzyme that aids in digestion), and even bile. Initially, this combination of caustic agents will agitate and redden the lining of the esophagus, but over time it can cause significant damage.

Interestingly, the reflux of liquid from the stomach is a common bodily experience for most people. However, in sufferers of GERD, the concentration of acid within the liquid is often significantly higher and the liquid itself stays in the esophagus—where it can do its damage—longer than in normal individuals.

For all people, the body does a number of things to minimize the impact of the refluxed acid. These protective measures include:

1. Gravity and the waking hours. Because most reflux occurs during waking hours, the body's upright position working with gravity helps the liquids to naturally make its way back down to the stomach.
2. Swallowing. Saliva, which contains bicarbonates which help to neutralize the damaging effects of acid, is a big part of managing refluxed liquids. Swallowing, then, goes a long way to help clear out the remaining reflux.

However, GERD sufferers and normal individuals alike become more susceptible to the damaging effects of reflux at night. The body's prone position as well as the lack of swallowing and saliva during sleep allows the refluxed liquids to remain longer in the esophagus, where they can do more damage.

**Note: Many confuse gastritis with GERD and, although similar symptoms do exist, gastritis and GERD are different.

What Causes GERD?

Compared to the relatively simple definition of what GERD is, what causes GERD is much more complicated. For the sake of providing you with a good working idea of the causes of GERD without boring you to tears, we've provided you with a thumbnail sketch of each of the main causes of GERD. For more information about any of these causes, we suggest you consult your primary care physician.

1. **Excess Production of Acid.** Believe it or not, only a small percentage of GERD sufferers are afflicted with the disease because their bodies produce an abnormally high amount of acid. Although it is a small segment of the GERD population, excess acid production can be a cause of the disease. In this instance, a sufferer simply produces more acid than the body knows what to do with and the refluxed acid has an unusually high degree of potency and can cause damage.
2. **Lower Esophageal Sphincter**—as you know the esophagus connects your throat to your stomach. Where your esophagus and stomach meet, a ring of muscle, called the lower esophageal sphincter, serves as a connector. Typically, the muscle is constricted so the contents of the stomach stay exactly where you want them to—in the stomach. However, when you are eating, the muscle relaxes momentarily to allow your food and liquids to make their way from the esophagus to the stomach. Basically, the lower esophageal sphincter acts as the gateway from your esophagus to your stomach.
3. However, for many GERD sufferers the lower esophageal sphincter is not performing its job correctly. Typically, there are two problems with lower esophageal sphincter that can lead to GERD.

- Weak muscle contraction. The lower esophageal sphincter in some GERD sufferers is extremely weak. In other words, it just doesn't close off the gateway between the stomach and the esophagus effectively. This "partially open door" allows acid to reflux more readily into the esophagus and cause damage.
 - Transient lower esophageal sphincter relaxations—Don't worry; it's not as complicated as it may sound. During normal swallowing, your lower esophageal sphincter relaxes for a few seconds to allow your food and liquids to pass through. However, in some GERD sufferers, the lower esophageal sphincter will relax at random times and not during eating. These "relaxations" also last for up to several minutes. During this time, the "gate" is wide open and acid can reflux into the esophagus unobstructed.
4. Hiatal Hernias. The ways in which hiatal hernias contribute to GERD is not entirely clear. However, a majority of GERD sufferers have hiatal hernias. At this point, you might be asking yourself, "What is a hiatal hernia?" That's a great question.

In normal individuals, the diaphragm surrounds the lower esophageal sphincter where it connects with the stomach. For GERD sufferers, a small part of the upper stomach—the part that connects the stomach to the esophagus—has actually pushed between the lower esophageal sphincter and the diaphragm.

If you're wondering how this condition leads to GERD, you've asked another great question. At its most basic, the diaphragm is thought to help the lower esophageal sphincter contract and keep the gateway between the esophagus and the stomach closed during all times except swallowing.

When a hiatal hernia presents itself, the ability of the diaphragm to help the lower esophageal sphincter is seriously compromised. As a result reflux can be heightened and acid can do its damage in the esophagus.

There are two additional ways that a hiatal hernia can cause reflux problems:

- **Hiatal Sac.** In the event of a hiatal hernia, a small portion of the upper stomach pushes its way past the lower esophageal sphincter. Because the lower esophageal sphincter is a muscle, it effectively pinches off this part of the stomach from the rest of the stomach. In this “sac” acid can build up. The built up acid is ready and waiting for the lower esophageal sphincter to relax at which time the reflux can easily re-enter the esophagus.
 - **Broken Door.”** In normal individuals, the esophagus connects at angle to the stomach. At the place where they connect, a flap of skin serves like a doorway to the stomach. In normal functioning, the door works with the lower esophageal sphincter and opens during swallowing and closes afterwards to prevent reflux. However, with a hiatal hernia, the angle at which the stomach and esophagus connect is altered and the doorway can become ineffective. No longer able to keep a good seal between the stomach and the esophagus, reflux can work its way back into the esophagus.
5. **Esophageal Contractions**—as we’ve seen, swallowing plays an important part in getting your food and liquids from your mouth to your stomach. In addition, we’ve seen how swallowing can help rid the esophagus of extra reflux. However, many GERD sufferers experience irregular swallowing abilities. In other words, the regular ability to push food from the top of the esophagus through to the stomach is not always possible for GERD sufferers. The inability of the esophagus to work as it should allows build up of reflux that would otherwise be pushed back down into the stomach. The excess reflux can then lead to esophageal problems.

What are the symptoms of GERD?

The symptoms of GERD range from moderate to severe. In uncomplicated forms of GERD, the symptoms generally consist of heartburn, nausea, and regurgitation. In cases where there are complications associated with GERD, the conditions that can be seen include ulcer, strictures, Barrett's' Esophagus, cough and asthma, and inflammation of the throat and larynx.

Heartburn

Just like it sounds, heartburn is associated with a general burning sensation around the middle of the chest. It can also be located in the abdomen, back, and up into the neck. Additionally, the pain can act more like what would be typically experienced with angina (e.g., pressure and sharpness, rather than burning). Heartburn results when the acid that has refluxed back into the esophagus irritates the nerves in the esophagus.

Regurgitation

Regurgitation occurs when refluxed liquids make their way back to the mouth. During regurgitation usually only small amounts of liquid return to the mouth, but at times food can appear. In addition, regurgitation is usually accompanied by an acidic taste in the mouth. With frequent regurgitation, the acid can actually begin breaking down tooth enamel.

Nausea

Although uncommon in most GERD sufferers, for some nausea can be an intense and debilitating side effect of GERD. It is not unusual for GERD sufferers who experience nausea to vomit.

As complications of GERD become more severe, any of the following conditions can result.

Ulcers

When acids reflux into the esophagus, inflammation and irritation occurs. When an area of the esophagus experiences prolonged or intense reflux, ulcers can form. An ulcer is a break in the lining of the esophagus. When severe, the ulcer and continued damage due to additional reflux can lead to bleeding which may require more serious medical attention.

Strictures

When ulcers begin to heal, they often form scar tissue within the esophagus. Over time and with the appearance of multiple ulcers, the scar tissue can actually shrink the width of the esophagus. When this happens, it can become difficult for the afflicted to swallow food. Medical procedures, such as endoscopy, may be used to remove stuck food and more involved surgery may be needed to widen the esophageal passage.

Barrett's Esophagus

For long-term and severe cases of GERD, the risk of Barrett's esophagus becomes more pronounced.

Barrett's esophagus is a condition in which the esophagus, the muscular tube that carries food and saliva from the mouth to the stomach, changes so that some of its lining is replaced by a type of tissue similar to that normally found in the intestine. This process is called intestinal metaplasia.

While Barrett's esophagus may cause no symptoms itself, a small number of people with this condition develop a relatively rare but often-deadly type of cancer of the esophagus called esophageal adenocarcinoma. Barrett's esophagus is estimated to affect about 700,000 adults in the United States. It is associated with the very common condition gastroesophageal reflux disease or GERD.

The exact causes of Barrett's esophagus are not known, but it is thought to be caused in part by the same factors that cause GERD. Although people who do not have heartburn can have Barrett's esophagus, it is found about three to five times more often in people with this condition.

Barrett's esophagus is uncommon in children. The average age at diagnosis is 60, but it is usually difficult to determine when the problem started. It is about twice as common in men as it is in women, and much more common in white men than in men of other races.

Barrett's esophagus does not cause symptoms itself and is important only because it seems to precede the development of a particular kind of cancer—esophageal adenocarcinoma. The risk of developing adenocarcinoma is 30 to 125 times higher in people who have Barrett's esophagus than in people who do not. This type of cancer is increasing rapidly in white men. This increase may be related to the rise in obesity and GERD.

For people who have Barrett's esophagus, the risk of getting cancer of the esophagus is small: less than 1 percent (0.4 percent to 0.5 percent) per year. Esophageal adenocarcinoma is often not curable, partly because the disease is frequently discovered at a late stage and because treatments are not effective.

Barrett's esophagus can only be diagnosed by an upper GI endoscopy to obtain biopsies of the esophagus. At present, it cannot be diagnosed on the basis of symptoms, physical exam, or blood tests. In an upper GI endoscopy, a flexible tube called an endoscope, which has a light and miniature camera, is passed into the esophagus. If the tissue appears suspicious, then biopsies must be done. A biopsy is the removal of a small piece of tissue using a pincher-like device passed through the endoscope. A pathologist examines the tissue under a microscope to confirm the diagnosis.

Barrett's esophagus has no cure, short of surgical removal of the esophagus, which is a serious operation. Surgery is recommended only for people who have a high risk of developing cancer or who already have it. Most physicians recommend treating GERD with acid-blocking drugs, since this is sometimes associated with improvement in the extent of the Barrett's tissue. However, this approach has not been proven to reduce the risk of cancer. Treating reflux with a surgical procedure for GERD also does not seem to cure Barrett's esophagus.

Several different experimental approaches are under study. One attempts to see whether destroying the Barrett's tissue by heat or other means through an endoscope can eliminate the condition. This approach, however, has potential risks and unknown effectiveness.

Asthma and Cough

As we have seen, refluxed liquid can stimulate the nerves in the esophagus causing heartburn. In addition, the stimulation of nerves can also lead to coughing and even asthma attacks. As the stimulated nerves signal the lungs breathing tubes to narrow, asthma attacks can and do occur.

Inflammation of the Throat and Larynx

When refluxed liquid makes it into the throat and larynx, it can cause soreness and hoarseness.

Inflammation and Infection of the Lungs

Refluxed liquid that makes its way passed the larynx can actually enter the lungs.

In the lungs, the liquid can cause coughing and choking. Even more seriously, the liquid can cause infection and lead to such illness as pneumonia.

As you can see, the complications of GERD can be both just plain irritating as well as very dangerous. Being sure to learn all you can about your symptoms and the treatments available to you, including the remedies we've included here in our report for you, is vitally important to your health. Take advantage of your knowledge and begin taking the steps to limiting and eliminating the impact of GERD and its related conditions in your life.

How Is GERD Treated?

If you have had heartburn or any of the other symptoms for a while, you should see your doctor. You may want to visit an internist, a doctor who specializes in internal medicine, or a gastroenterologist, a doctor who treats diseases of the stomach and intestines. Depending on how severe your GERD is, treatment may involve one or more of the following lifestyle changes and medications or surgery.

Lifestyle Changes

- If you smoke, stop.
- Do not drink alcohol.
- Lose weight if needed.
- Eat small meals.
- Wear loose-fitting clothes.
- Avoid lying down for 3 hours after a meal.
- Raise the head of your bed 6 to 8 inches by putting blocks of wood under the bedposts—just using extra pillows will not help.

Medications

Your doctor may recommend over-the-counter antacids, which you can buy without a prescription, or medications that stop acid production or help the muscles that empty your stomach.

Antacids, such as Alka-Seltzer, Maalox, Mylanta, Pepto-Bismol, Rolaids, and Riopan, are usually the first drugs recommended to relieve heartburn and other mild GERD symptoms. Many brands on the market use different combinations of three basic salts—magnesium, calcium, and aluminum—with hydroxide or bicarbonate ions to neutralize the acid in your stomach. Antacids, however, have side effects. Magnesium salt can lead to diarrhea, and aluminum salts can cause constipation. Aluminum and magnesium salts are often combined in a single product to balance these effects.

Calcium carbonate antacids, such as Tums, Titralac, and Alka-2, can also be a supplemental source of calcium. They can cause constipation as well.

Foaming agents, such as Gaviscon, work by covering your stomach contents with foam to prevent reflux. These drugs may help those who have no damage to the esophagus.

H₂ blockers, such as cimetidine (Tagamet HB), famotidine (Pepcid AC), nizatidine (Axid AR), and ranitidine (Zantac 75), impede acid production. They are available in prescription strength and over the counter. These drugs provide short-term relief, but over-the-counter H₂ blockers should not be used for more than a few weeks at a time.

They are effective for about half of those who have GERD symptoms. Many people benefit from taking H₂ blockers at bedtime in combination with a proton pump inhibitor.

Proton pump inhibitors include omeprazole (Prilosec), lansoprazole (Prevacid), pantoprazole (Protonix), rabeprazole (Aciphex), and esomeprazole (Nexium), which are all available by prescription. Proton pump inhibitors are more effective than H2 blockers and can relieve symptoms in almost everyone who has GERD.

Another group of drugs, prokinetics, helps strengthen the sphincter and makes the stomach empty faster. This group includes bethanechol (Urecholine) and metoclopramide (Reglan). Metoclopramide also improves muscle action in the digestive tract, but these drugs have frequent side effects that limit their usefulness.

Because drugs work in different ways, combinations of drugs may help control symptoms. People who get heartburn after eating may take both antacids and H2 blockers. The antacids work first to neutralize the acid in the stomach, while the H2 blockers act on acid production. By the time the antacid stops working, the

H2 blocker will have stopped acid production. Your doctor is the best source of information on how to use medications for GERD.

What If Symptoms Persist?

If your heartburn does not improve with lifestyle changes or drugs, you may need additional tests.

- A barium swallow radiograph uses x rays to help spot abnormalities such as a hiatal hernia and severe inflammation of the esophagus. With this test, you drink a solution and then X-rays are taken. Mild irritation will not appear on this test, although narrowing of the esophagus—called stricture—ulcers, hiatal hernia, and other problems will.
- Upper endoscopy is more accurate than a barium swallow radiograph and may be performed in a hospital or a doctor's office. The doctor will spray your throat to numb it and slide down a thin, flexible plastic tube called an endoscope.

A tiny camera in the endoscope allows the doctor to see the surface of the esophagus and to search for abnormalities. If you have had moderate to severe symptoms and this procedure reveals injury to the esophagus, usually no other tests are needed to confirm GERD.

The doctor may use tiny tweezers (forceps) in the endoscope to remove a small piece of tissue for biopsy. A biopsy viewed under a microscope can reveal damage caused by acid reflux and rule out other problems if no infecting organisms or abnormal growths are found.

- In an ambulatory pH monitoring examination, the doctor puts a tiny tube into the esophagus that will stay there for 24 hours. While you go about your normal activities, it measures when and how much acid comes up into your esophagus. This test is useful in people with GERD symptoms but no esophageal damage. The procedure is also helpful in detecting whether respiratory symptoms, including wheezing and coughing, are triggered by reflux.

Surgery. . . But lets not get this far!

Surgery is an option when medicine and lifestyle changes do not work. Surgery may also be a reasonable alternative to a lifetime of drugs and discomfort.

Fundoplication, usually a specific variation called Nissen fundoplication, is the standard surgical treatment for GERD. The upper part of the stomach is wrapped around the LES to strengthen the sphincter and prevent acid reflux and to repair a hiatal hernia.

This fundoplication procedure may be done using a laparoscope and requires only tiny incisions in the abdomen. To perform the fundoplication, surgeons use small instruments that hold a tiny camera.

Laparoscopic fundoplication has been used safely and effectively in people of all ages, even babies. When performed by experienced surgeons, the procedure is reported to be as good as standard fundoplication. Furthermore, people can leave the hospital in 1 to 3 days and return to work in 2 to 3 weeks.

In 2000, the U.S. Food and Drug Administration (FDA) approved two endoscopic devices to treat chronic heartburn. The Bard EndoCinch system puts stitches in the LES to create little pleats that help strengthen the muscle. The Stretta system uses electrodes to create tiny cuts on the LES. When the cuts heal, the scar tissue helps toughen the muscle. The long-term effects of these two procedures are unknown.

Implant

Recently the FDA approved an implant that may help people with GERD who wish to avoid surgery. Enteryx is a solution that becomes spongy and reinforces the LES to keep stomach acid from flowing into the esophagus. It is injected during endoscopy. The implant is approved for people who have GERD and who require and respond to proton pump inhibitors. The long-term effects of the implant are unknown.

Points to Remember

Heartburn, also called acid indigestion, is the most common symptom of GERD. Anyone experiencing heartburn twice a week or more may have GERD.

You can have GERD without having heartburn. Your symptoms could be excessive clearing of the throat, problems swallowing, the feeling that food is stuck in your throat, burning in the mouth, or pain in the chest.

In infants and children, GERD may cause repeated vomiting, coughing, and other respiratory problems. Most babies grow out of GERD by their first birthday.

If you have been using antacids for more than 2 weeks, it is time to see a doctor. Most doctors can treat GERD. Or you may want to visit an internist—a doctor who specializes in internal medicine—or a gastroenterologist—a doctor who treats diseases of the stomach and intestines.

Doctors usually recommend lifestyle and dietary changes to relieve heartburn. Many people with GERD also need medication. Surgery may be an option.

Ongoing Research

No one knows why some people who have heartburn develop GERD. Several factors may be involved, and research is under way on many levels. Risk factors— what makes some people get GERD but not others—are being explored, as is GERD's role in other conditions such as asthma and bronchitis.

The role of hiatal hernia in GERD continues to be debated and explored. It is a complex topic because some people have a hiatal hernia without having reflux, while others have reflux without having a hernia.

Much research is needed into the role of the bacterium *Helicobacter pylori*. Our ability to eliminate *H. pylori* has been responsible for reduced rates of peptic ulcer disease and some gastric cancers. At the same time, GERD, Barrett's esophagus, and cancers of the esophagus have increased. Researchers wonder whether having *H. pylori* helps prevent GERD and other diseases. Future treatment will be greatly affected by the results of this research.

A Note about GERD and Children

Studies show that GERD is common and may be overlooked in infants and children. It can cause repeated vomiting, coughing, and other respiratory problems. Children's immature digestive systems are usually to blame, and most infants grow out of GERD by the time they are 1 year old. Still, you should talk to your child's doctor if the problem occurs regularly and causes discomfort.

Your doctor may recommend simple strategies for avoiding reflux, like burping the infant several times during feeding or keeping the infant in an upright position for 30 minutes after feeding. If your child is older, the doctor may recommend avoiding:

- sodas that contain caffeine
- chocolate and peppermint
- spicy foods like pizza
- acidic foods like oranges and tomatoes
- fried and fatty foods

Avoiding food 2 to 3 hours before bed may also help. The doctor may recommend that the child sleep with his/her head raised. If these changes do not work, the doctor may prescribe medicine for your child. In rare cases, a child may need surgery.

What Is Gastritis?

Although some symptoms appear similar to those of GERD patients, gastritis is a different illness altogether. In fact, gastritis is not a single disease at all, but several different conditions that all have inflammation of the stomach lining.

Gastritis can be caused by drinking too much alcohol, prolonged use of non-steroidal anti-inflammatory drugs (NSAIDs) such as aspirin or ibuprofen, or infection with bacteria such as *Helicobacter pylori* (*H. pylori*). Sometimes gastritis develops after major surgery, traumatic injury, burns, or severe infections. Certain diseases, such as pernicious anemia, autoimmune disorders, and chronic bile reflux, can cause gastritis as well.

The most common symptoms are abdominal upset or pain. Other symptoms are belching, abdominal bloating, nausea, and vomiting or a feeling of fullness or of burning in the upper abdomen. Blood in your vomit or black stools may be a sign of bleeding in the stomach, which may indicate a serious problem requiring immediate medical attention.

Gastritis is diagnosed through one or more medical tests:

- Upper gastrointestinal endoscopy. The doctor eases an endoscope, a thin tube containing a tiny camera, through your mouth (or occasionally nose) and down into your stomach to look at the stomach lining. The doctor will check for inflammation and may remove a tiny sample of tissue for tests. This procedure to remove a tissue sample is called a biopsy.
- Blood test. The doctor may check your red blood cell count to see whether you have anemia, which means that you do not have enough red blood cells. Anemia can be caused by bleeding from the stomach.

- Stool test. This test checks for the presence of blood in your stool, a sign of bleeding. Stool test may also be used to detect the presence of H. pylori in the digestive tract.

Treatment usually involves taking drugs to reduce stomach acid and thereby help relieve symptoms and promote healing. (Stomach acid irritates the inflamed tissue in the stomach.) Avoidance of certain foods, beverages, or medicines may also be recommended.

If your gastritis is caused by an infection, that problem may be treated as well. For example, the doctor might prescribe antibiotics to clear up H. pylori infection. Once the underlying problem disappears, the gastritis usually does too. Talk to your doctor before stopping any medicine or starting any gastritis treatment on your own.

Resource Information

In this section, we have gathered a collection of quality resources to help you learn more about GERD and acid reflux. These excellent resources will help you in your goal of creating a healthy, happy life.

American College of Gastroenterology (ACG)

4900-B South 31st Street
Arlington, VA 22206-1656
Phone: 703-820-7400
Fax: 703-931-4520

American Gastroenterological Association (AGA)

National Office
4930 Del Ray Avenue
Bethesda, MD 20814
Phone: 301-654-2055
Fax: 301-652-3890

North American Society for Pediatric Gastroenterology, Hepatology, and Nutrition
(NASPGHAN)

P.O. Box 6
Flourtown, PA 19031
Phone: 215-233-0808
Fax: 215-233-3939

Pediatric/Adolescent Gastroesophageal Reflux Association Inc. (PAGER)

P.O. Box 1153
Germantown, MD 20875-1153
Phone: 301-601-9541

International Foundation for Functional Gastrointestinal Disorders (IFFGD) Inc.

P.O. Box 170864

Milwaukee, WI 53217

Phone: 1-888-964-2001 or 414-964-1799

Fax: 414-964-7176

National Cancer Institute (NCI) National Institutes of Health

31 Center Drive

Building 31, Room 10A-19

Bethesda, MD 20892

Phone: 301-496-6641

Fax: 301-496-0846

National Digestive Diseases Information Clearinghouse

2 Information Way

Bethesda, MD 20892-3570