



LPR

What is LPR? LPR is when stomach acid backflows up and onto the larynx (voice box) and the pharynx (the base of the throat). The tissues of the throat and voice box are easily damaged by stomach acid when this backflow occurs more than occasionally. This condition is also called **silent reflux** and **atypical reflux**. LPR is related to gastroesophageal reflux (GERD), but is not the same condition. People with GERD typically have heartburn as their main symptom. You don't need to have "heartburn" to have LPR.

Signs of LPR include:

- Voice changes or hoarseness
- Frequent throat clearing
- Difficulty swallowing
- Frequent choking or coughing
- A feeling of "something stuck in my throat" or globus sensation
- Excessive mucous
- Postnasal drip
- Bad/bitter taste in the mouth
- Heartburn

Diagnosing LRP: Usually the doctor can diagnose LPR by examining your throat and your voice box (larynx) in the office. No special preparation is needed for this examination. The tissue in your throat and voice box may look red, irritated and swollen from the acid reflux damage. This will eventually go away with lifestyle changes and medication. However, the healing may take months.

Treatment: Proper treatment of LPR may require you to do a few things.

- **Medication.** Your doctor may suggest one or ore medications for your condition. Take your medicine as directed by your doctor. Notify you doctor before changing any of the medications or stopping them. It is important to take your medication 30-60 minutes before your first meal of the day. If taking the medication twice a day, take the second pill 30 minutes before dinner. Some examples of medications that may be prescribed are:
 - **Histamine Blockers**, which reduce acid production by blocking signals that tell the stomach to make acid. Pepcid (Famotidine) and Tagamet (Cimetidine) are examples of Beta Blockers.
 - **Proton Pump Inhibitors**, which stop the acid from forming. Examples of PPI's are Aciphex (Rabeprazole), Prilosec (Omeprazole), Nexium (Esomeprazole), Protonix (Pantoprazole), and Prevacid (Lansoprazole). Long term treatment of PPI's can diminish the calcium in the bones. Calcium supplements are sometimes recommended for patients on a PPI.
- **Lifestyle Changes.** In addition to your medications, you may need to make some lifestyle changes. Eating small and more frequent meals along with consuming eight, 8-ounce glasses of water daily. You should try to limit the following foods and drinks:
 - Alcohol (ncluding wine), caffeinated beverages (coffee/tea), carbonated beverages (soda) and citrus based beverages (orange, lemon, pineapple, tomato base).
 - Dairy products
 - Fatty, greasy foods and spicy foods
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