Laryngopharyngeal Reflux (LPR)

LPR is the movement of stomach acid upward into the throat. The body produces more mucus to neutralize the acid. People may have symptoms including excessive throat clearing, persistent dry cough, sore throats, hoarseness, or a sensation that something is stuck in their throat. Treatment of LPR can include lifestyle changes involving diet and behavior, as well as medications.

Diet Changes:
Certain beverages and foods can impact LPR in different ways and should be avoided or reduced in terms of frequency of intake, including:

- Caffeinated coffee and tea
- Alcohol
- Carbonated beverages (soda and seltzer water)
- Chocolate
- Citrus fruits and pineapple
- Peppermint
- Spicy foods
- Tomatoes
- Fatty and fried foods

Behavior Changes:

- Stop eating three hours before bedtime and prop the head of your bed within a four-inch wedge to allow gravity to help keep contents in your stomach.
- Try not to exercise or sing two hours prior to sleep, as it will force stomach contents into the mouth.
- Quit smoking, there are multiple options available to aid in smoking cessation.

Medications:
There are two main families of reflux medications including Proton Pump Inhibitors (PPI) and H2 blockers. PPIs are most effective if taken 30 to 60 minutes prior to eating a meal. It can take a few months to note an improvement with your symptoms with use. There are recent studies that question the safety of long term use of PPIs with possible side effects that can occur including long bone fractures, magnesium and B12 deficiencies, and kidney disease. H2 blockers are not as effective as PPIs, however are seen as a safer alternative to PPIs.

In addition medications such as Tums, Gaviscon, and Mylanta may be utilized.