

Popping an Antacid May Halt Heartburn – But is it the Safe Option?

For many people, a bit of heartburn in the middle of the night from a double burger with cheese and extra mayo at dinner can be remedied by chewing a couple of dry antacid tablets. Between these chalky tablets and that little purple pill endlessly advertised on *Matlock* and *Murder She Wrote* television reruns, the problem appears solved. Almost instantly.

And when we say heartburn, we're also referring to gastroesophageal reflux disease (GERD), acid reflux, and ulcers. But here's the thing. Yes, those over-the-counter cures do the trick for many sufferers, but have you considered the potential impact on your health? We're talking cardiovascular disease, chronic kidney disease, and even cancer.

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In fact, the U.S. Food and Drug Administration's (FDA) recently recalled the prescription and over the counter (OTC) ranitidine medication commonly known by the brand name Zantac. The feds said their scientists discovered a probable human carcinogen – a substance that could cause cancer – in some ranitidine products. Containing N-Nitrosodimethylamine (NDMA), these products were found to expose consumers to unacceptable levels of carcinogens when stored at higher than room temperatures.

Ranitidine is a histamine-2 blocker – a form of heartburn medication – and it is described as far less harmful for those with heartburn than proton pump inhibitors (PPIs). A recent study of PPIs (*Estimates of mortality associated with proton pump inhibitors among US veterans*) published in May of last year in the *British Medical Journal*, found that PPIs were associated with cause-specific mortality rates of 45 out of every 1,000 subjects. That study was conducted by the Department of Veterans

Affairs, Saint Louis University, and Washington University School of Medicine in Saint Louis. In a second study, published in 2006, the *Journal of the American Medical Association* concluded that long-term PPI therapy is associated with an increased risk of hip fracture.

Dementia, chronic kidney disease, pneumonia, diarrhea, iron deficiency, and vitamin B12 deficiency were other potential unhealthy side effects of PPIs.

Most of us know what acid indigestion feels like. The term heartburn is quite literal. It's a condition where food from the stomach reverses course and backs up into the esophagus. The result is an unpleasant taste and an alarming feeling that some describe as that of an impending heart attack.

Proton Pump Inhibitors Were Designed to Reduce Acid in the Stomach

It was in the 1980s that drug manufacturers developed PPIs to treat acid-related disorders in the upper gastrointestinal tract – and the pharmaceutical industry had an instant customer base of between 15 to 20 million Americans who used prescriptions for PPIs in order to bring them comfort.

The drug was designed to reduce the production of acid in the wall of the stomach, thereby preventing ulcers and helping to heal ulcers found in the esophagus, stomach, and small intestine. Today, there remain a number of PPIs on the market, including:

- Zegerid (Omeprazole and sodium bicarbonate)
- Nexium (Esomeprazole)
- Prevacid (Lansoprazole)
- Prilosec (Omeprazole)
- Dexilant (Dexlansoprazole)

- Protonix (Pantoprazole)
- Aciphex (Rabeprazole)

Problems arose when it was discovered that more than half of people taking PPIs did so without a documented medical need. And 80 percent of those were found to be consuming lower doses of the prescribed medicine – about the same as those found in over-the-counter versions of heartburn cures.

The Problem with Proton Pump Inhibitors

The problem with PPIs and other medications used to reduce stomach acid isn't that they don't do what they are expected to do. They perform that task quite well. The thing is, generally, stomach acid is a *good* thing. It helps us digest our food, it's hell on harmful bacteria and unwelcome viruses, and it improves absorption of certain nutrients.

So, when we take medication to reduce stomach acid, we inhibit the absorption of key nutrients, including B vitamins, which, among other tasks, keeps homocysteine levels in check. When homocysteine levels get high, the risk of disease also increases. And by diseases, we're talking about dementia, stroke, depression, anxiety, estrogen-related cancers, and other disorders. Adding fuel to the mix, PPIs also reduce the absorption of minerals such as calcium and magnesium.

As functional medicine practitioners, we here at BioDesign Wellness Center take a different route when it comes to treating indigestion. We find the root cause or causes of indigestion and then we deal with it. And this starts with dissuading our patients from taking PPIs or their over-the-counter doppelgangers. There are safer paths that you can take to address your heartburn or stomach acid issues.

Heartburn and Functional Medicine

When it comes to our treatment of gastroesophageal reflux disease (GERD), acid reflux, and ulcers, we employ a very specific framework – one that accounts for three highly specific stages: *discovery, restorative practices, and the optimization of your overall health and wellbeing.* This approach considers the role of lab tests, diagnostics that tell us about the state of your nervous system, detoxification, nutrition, hormone therapy, the how physical activity may all play a part in positively impacting your health. We have found that within three months of treatment, most of our patients no longer require PPIs or over-the-counter medicines to manage their heartburn issues.

We test and treat for low levels of acid production, because acid reflux can actually be caused by too little stomach acid – especially among our older patients. We also test for hypothyroidism, stress, gut dysbiosis, diet habits or overeating, a weak stomach lining, poor bile production and gallbladder issues.

The bottom line is this: If you're ready to dump the heartburn medications out of your medicine cabinet and join us in exploring the root causes of your stomach issues, please call us at (813) 445-7770.

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