Laryngopharyngeal Reflux (LPR)

What is LPR?
LPR, also known as “silent reflux”, is when stomach acid backs up into your throat (pharynx) or voice box (larynx). If the backflow of acid happens often, it can damage tissues in your throat and voice box.

LPR is similar to Gastroesophageal Reflux (GERD), but it is not the same condition. With GERD heartburn is very common. With LPR you may or may not have heartburn.

Signs of LPR may include:
- Voice changes (a hoarse or raspy voice)
- Problems swallowing or choking
- Chronic cough
- A feeling of “something in my throat”
- Extra throat mucus or postnasal drip
- Bad or bitter taste in your mouth
- Heartburn or indigestion
- Feeling like you are unable to take a deep breath
You may be at risk for LPR if you:

- Use tobacco
- Use alcohol
- Are overweight
- Are stressed
- Eat close to bedtime
- Eat large meals
- Lay down or exercise after you eat
- Wear tight clothes
- Drink carbonated, caffeinated and or citrus based beverages
- Eat fried, fatty or spicy foods
- Eat certain foods such tomato-based products, citrus fruit, chocolate, and mint

**Diagnosis**

Your doctor will talk with you about your symptoms and use a mirror, light and a special camera (laryngoscope) to look at your throat and voice box. A special test called a pH probe may also be done to measure the stomach acid that backs up into your throat or voicebox. The tissue in your throat and voice box may look red, irritated and swollen from the acid reflux damage. This should go away in a few months with medicine and diet and lifestyle changes.

**Treatment for LPR**

**Medicines**

Your doctor may order the following medicine(s) to help lower your stomach acid. *Always take your medicine as directed by your doctor.*

- **Histamine blockers** lower your stomach acid by blocking the signals that tell your stomach to make acid:
  - Pepcid (famotidine)
  - Tagamet (cimetidine)
  - Zantac (ranitidine)
- **Proton pump inhibitors** stop your stomach acid from forming:
  - Aciphex (rabeprazole)
  - Nexium (esomeprazole)
  - Prevacid (lansoprazole)
  - Prilosec (omeprazole)
  - Dexilant (dextansoprazole)
  - Protonix (pantoprazole)

It is important to take your medicine on an empty stomach about 30 to 60 minutes before you eat a meal. Always eat something within 60 minutes after you take the medicine.

Talk with your doctor or pharmacist about all the medicines you take, including prescription or over-the-counter medicines, supplements, vitamins, and herbal remedies. Some medicines can increase the acid levels in your stomach and cause more symptoms of LPR. **Do not stop any medicines without talking to the doctor that ordered them.**

**Medicines that may increase your stomach acid include:**
- Non-steroidal anti-inflammatory drugs (NSAIDs) such as aspirin, ibuprofen (Advil, Motrin) and naproxen (Aleve)
- Vitamin C
- Alpha blockers
- Asthma medicines (Theophylline)
- Anticholinergic medicines
- Blood pressure medicines (Beta Blockers or Calcium Channel Blockers)
- Progesterone: Provera; Birth control pills

**Diet and Lifestyle Changes**
You may also need to make diet and lifestyle changes to help lower your stomach acid.

**You may find it helpful to:**
- Eat 5 to 6 small during the day.
• **Limit these foods and drinks:**
  - Alcohol including wine, beer and liquor
  - Caffeine and caffeinated beverages
  - Carbonated beverages
  - Citrus based beverages
  - Citrus fruits
  - Chocolate and mint

• **Fatty foods**
• **Spicy foods**
• **Tomato-based foods**
  - (red pasta sauce, pizza or tomato soup)

**Other Helpful Tips**

• Quit smoking.
• Maintain a normal body weight.
• Wear loose-fitting clothes.
• Do not bend over after a meal.
• Wait 2 to 3 hours after a meal to exercise or sing.
• Stay upright after you eat. Do not lie down for 2 to 3 hours after you eat.
• Prop your head up when you sleep. It may help to use bed blocks or extra pillows.
• Eat 2 to 3 hours before you go to bed.

The LPR should go away in a few months after you start your medicine and make changes to your diet and lifestyle.