

## Emily McGregor 2/17/2022

### Evaluation and management of heartburn

1. Definition or Key Clinical Information: Heartburn, also known as **gastroesophageal reflux (GERD)** is the regurgitation or reflux of acidic gastric contents into the lower esophagus. This can be due to several factors including the changing hormones in the pregnant body including relaxins and progesterone.
2. Assessment
  - I. Risk Factors:** May cause damage to the esophagus, may increase choking hazard while eating. Can increase nausea and vomiting, and decrease appetite. Unresolved heartburn can cause dental decay.
  - II. Subjective Symptoms:**
    1. Roughly 40-80% of people experience heartburn at some point in their pregnancy.
    2. Heartburn is more common in the third trimester.
    3. Journal lifestyle and diet triggers.
  - III. Objective Signs:**
    1. Burning in the lower esophagus.
    2. Uncomfortable
    3. Possibly debilitating
  - IV. Clinical Test Considerations:**
    1. Clinical testing is not available for this condition.
3. Management plan
  - I. Therapeutic measures to consider:**
    1. Eat small, frequent meals.
    2. Chew food well.
    3. Limit spicy and greasy foods.
    4. Limit caffeine intake.
    5. Avoid laying down directly after eating.
    6. Ginger, carrot, celery, and apple juice may calm the bowels.
    7. Focus on keeping bowels regular.
      - High fibrous foods
      - Exercise roughly 30 min X3 days a week
      - Stay hydrated Chia seeds in water
      - Take a pre and probiotic

- Taking short walks after eating

## **II. Complementary measures to consider:**

1. CAL Mag supplementation.
  - CALM 1 scoop with 16 oz water sipped throughout the day.
2. OTC Antacids
  - Sodium carbanate based antacids during pregnancy is recommended!

## **III. Considerations for pregnancy:**

1. **-Avoid** Alka-Seltzer because they can cause fetal metabolic alkalosis
2. Rule out Pre-eclampsia
  - Confirm BP is stable
  - Palpitation of the stomach
  - Rule out headaches associated with heartburn

## **IV. Client and family education:**

1. Client handout on heartburn
2. Food log journal

## **V. Follow-up:**

1. On food log journal
2. Efficacy of treatment

## **4. Indications for consult, collaboration or referral**

- Accompanying Pre-E signs or symptoms send for referral.
- If heartburn doesn't improve with treatment, collaborate with PCP.

## **5. References:**

King, T., Brucker, M., Osborne, K., Jevitt, C (2019). *Varney's Midwifery* (6th ed.)

Jordan, R., Farley, C., Grace, K., (2019). *Prenatal and Postnatal Care* (2nd ed.)  
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