



No Roman Holiday

The plop and fizz for Caesar-sized heartburn By Greg Lugliani

April 1, 2000 By Greg Lugliani

Help me, Healer!

Hellacious heartburn, seemingly sent by Satan herself, has been my curse lately. While I've come to live for antacids, is there anything else to extinguish this fiendish fire?

—*The Acid Queen*

Dear Queen:

My humble medical knowledge, Your Raging Highness, is, of course, at your command, especially if it can help subdue those rather misnamed flames. What we call heartburn—once you've ruled out a heart attack, which shares some symptoms—is the searing sensation experienced when powerful stomach acid and digestive enzymes back up (“reflux”) into the ultrasensitive esophagus. That is the hallmark of a condition called gastroesophageal reflux disease or—yes, dears, acronym time—GERD. Reflux resulting from GERD occurs when the muscular “sphincter” ring that separates the esophagus from the stomach relaxes or is injured, or when extreme pressure—from straining, bending or gorging in the style of a Caligula—mounts in the stomach. About one-third of adult Americans have heartburn once a month, so your misery is a virtual national pastime.

While GERD strikes crowned heads and commoners alike, certain factors increase one's risk, including age (particularly being over 65), a high-fat diet, obesity, pregnancy, hiatal hernias and that trinity of divine stimulants—caffeine, nicotine and alcohol. Other heartburn catalysts: lying down too soon after feeding; feasting on citrus fruits, fried or spicy foods, chocolate, carbonated sodas, spearmint or peppermint (by Jove, is the cupboard bare?); serious athletic training (more than 10 hours a week); and even leading a garden-variety stressful life.

And look here, Queenie, wouldn't you know that certain medications cause heartburn too? Protease inhibitors' skill in this department is styled “protease reflux.”

“But how do I spell relief?” you screech. About 80 to 90 percent of GERD victims are said to conquer it completely by making lifestyle changes. In addition to avoiding some or all of the culprits cited above, try cleaning up with these acts: controlling one's weight; eschewing skintight togs; eating fewer, smaller meals; consuming more fresh, raw foods; and, believe it or not, even raising the head of one's bed four to nine inches. (No, lambs, fluffier pillows alone won't do the trick!)

But for those of us too attached to the way we live now, a plethora of painless remedies is at hand. Your majesty alludes to antacids, including the over-the-counter perennials Alka-Seltzer, Maalox, Mylanta, Tums and Rolaids. (Note, however, that long-term use of magnesium-containing antacids can cause

diarrhea, while prolonged use of those mixed with aluminum may lead to constipation.) Another class of drugs known as acid, or H₂, blockers (Pepcid AC, Tagamet HB and Zantac 75) is available in prescription and non-prescription strength. They prevent heartburn when taken 30 minutes prior to those Szechuan prawns you crave. (Tipplers, pay heed: Some studies have shown that acid blockers also subdue stomach enzymes that break down alcohol, thus potentially upping the level of alcohol in your bloodstream.)

If you lean to the green, nature's surcease from acid reflux may be derived from a number of herbs, including licorice root, angelica, chamomile, lemon balm, cardamom and dill.

If Vesuvius erupts several times a week, however, you'd do well to give doc a call. For the relatively few chronic reflux sufferers who would otherwise need lifelong medication, an effective surgical intervention to tighten that sphincter (fundoplication) may be employed. And while heartburn is hardly life-threatening—and who hasn't giggled over those silly advertisements ("I can't believe I ate the whole thing")?—it bears pointing out that if the burning goes unchecked, serious consequences may develop, among them esophagitis and its attendant bleeding, permanent scarring, narrowing or ulceration of the esophagus. A condition known as Barrett's Syndrome, which may increase one's risk of esophageal cancer, is also possible. According to a study in *The New England Journal of Medicine*, in fact, such a cancer risk was eight-fold for those who suffered heartburn, regurgitation or both at least once a week.

With this in mind, my dearest darlings, I strongly advise you never to fiddle whilst your heart burns.

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