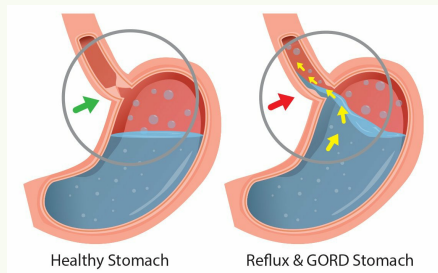


### GORD



### What is it?

Gastroesophageal reflux – sphincter at top of stomach doesn't work properly. Stomach acid → oesophagus.

Over time = damage to oesophagus (oesophagitis or Barrett's oesophagus – lining changes over time due to irritation = ↑ cancer risk)

### Risk factors

weight	aging
genetics	pregnancy
trauma	

### Associated foods

spicy	high fat
onion	tomato
pineapple	capsicum
OJ	citrus
cream-base soups	pepper
alcohol	caffeine
chewing gum	chocolate
Mint	fizzy drinks

### S/S

Belching (burping)	heartburn
oesophageal spasm	weight loss
dysphagia	sour taste
regurgitation (-> dental erosion)	sensation of lump in throat
oesophageal inflammation and narrowing	

### NIS

Malnutrition
Dysphagia
Odynophagia (painful swallowing)
Cough (↑ EER)

### Intervention

Identify and reduce trigger foods
Achieve & maintain a healthy body weight
Medical management: PPI therapy (reducing stomach acid production, which helps relieve S/S and promote healing of the oesophageal lining) – taken before meals
Malnutrition screening

### Strategies

↓ fatty foods
Avoid eating within 4 hours of bed
Avoid eating before vigorous exercise
Avoid drinking with meals (30 mins before/after)
Smaller meals
Avoid laying down after eating
Lifestyle: stress reduction, stop smoking, avoid tight clothes

### Example PESS

*inadequate oral intake, related to GORD with oesophageal spasm, sore throat and sour taste, as evidenced by weight loss of \_\_\_kg 6/52*

### Monitoring

Food triggers	Wt hx
Malnut screening	

### Guidelines & References

Handbook p211
Gut foundation treatment of gastro-oesophageal reflux disease in adults and children (2016)



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Page 1 of 1.

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