If it's not controlled, acid reflux or GERD can result in serious problems, including esophagitis, esophageal bleeding and ulcers, Barrett’s esophagus, strictures, and an increased risk of esophageal cancer.

What Is Esophagitis?

Too much stomach acid backwash in the esophagus can cause a painful and irritating inflammation of the esophagus called esophagitis. It occurs when stomach acid repeatedly comes into contact with the lining of the esophagus. Esophagitis may lead to esophageal bleeding or ulcers and scarring.
What Is Barrett's Esophagus?

Barrett's esophagus is a serious condition that develops in some people who have chronic GERD. Most people with GERD, however, do not develop Barrett's esophagus. GERD is a major risk factor, but people without GERD may develop Barrett's esophagus.

In Barrett's esophagus, damage to the lining of the esophagus -- for example, by acid reflux from GERD -- can cause abnormal changes in the cells that line the esophagus. The normal cells that line the esophagus are damaged and replaced by a type of cell not usually found in the esophagus. People with Barrett's esophagus may be at risk of developing cancer of the esophagus, but most people with Barrett's esophagus do not develop cancer of the esophagus.

What Are the Symptoms of Barrett's Esophagus?

Symptoms may be similar to those of GERD, although some people have no symptoms at all.

How Is Barrett's Esophagus Diagnosed?

Barrett's esophagus is diagnosed with a test called an upper endoscopy to look at the inside of the esophagus and obtain a biopsy to examine a sample of tissue.

How Is Barrett's Esophagus Treated?

The goal of treatment is to prevent further damage to the esophagus due to acid coming up from the stomach. Proton-pump inhibitor medications like rabeprazole (Aciphex), esomeprazole (Nexium), lansoprazole (Prevacid), omeprazole (Prilosec), pantoprazole (Protonix), dexlansoprazole (Dexilant) and omeprazole/ sodium bicarbonate (Zegerid) are the mainstay of treatment. These drugs reduce the amount of acid produced by the stomach. If these medications do not work, surgery to tighten the sphincter or "valve" between the esophagus and stomach may be necessary.

Doctors may remove or use laser therapy to destroy abnormal tissue. These procedures are usually reserved for those patients at high risk of developing esophageal cancer.
Heartburn/GERD Guide

1 Basics & Triggers
2 Symptoms & Prevention
3 Diagnosis & Tests
4 Treatment & Care
5 Living & Managing
6 Support & Resources

Further Reading:
Slideshow: A Visual Guide to Understanding Heartburn and GERD
The Esophagus (Human Anatomy): Picture, Function, Conditions, and More
What is esophagitis?
Heartburn & GERD: Finding Help
Get the Facts About Gastroesophageal Reflux Disease (GERD)
Is it Heartburn or GERD?
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