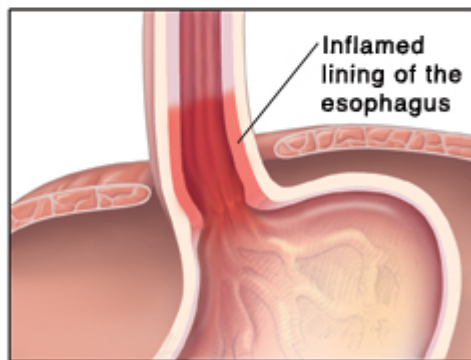
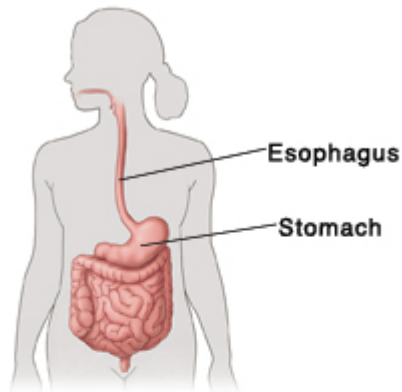


Esophagitis

Esophagitis is when the lining of the esophagus becomes red and swollen (inflamed). The esophagus is the tube that links your throat to your stomach. This sheet tells you more about esophagitis. It also talks about types, symptoms, diagnosis, and treatment.



Main types of esophagitis

Reflux esophagitis. This is the more common type. It's caused by GERD (gastroesophageal reflux disease). Stomach contents and acid flow back up into the esophagus. This happens over and over. It leads to inflammation. You are more likely to get this type if you:

- Are overweight
- Have asthma
- Smoke
- Are pregnant
- Vomit a lot
- Take certain medicines, such as aspirin and other nonsteroidal anti-inflammatory drugs (NSAIDs)
- Have a hiatal hernia
- Eat certain foods, such as chocolate or spicy food

Infectious esophagitis. This is caused by an infection. You are more at risk for this kind if you have a weak immune system and poor nutrition. Using antibiotics can also raise your risk. The infection is often from:

- A type of fungus (often candida)
- A virus, such as herpes simplex virus 1 (HSV-1) or cytomegalovirus (CMV)

Eosinophilic esophagitis. Food allergies, acid reflux, or an airborne (seasonal) allergy can trigger your immune system to respond with this allergic reaction. It may lead to this type of esophagitis.

Pill-induced esophagitis. Certain types of medicines can cause inflammation and ulcers in the esophagus. Some of these are:

- Doxycycline
- Aspirin
- Certain NSAIDs
- Alendronate
- Potassium
- Quinidine
- Iron
- Acetaminophen
- Warfarin
- Chemotherapy medicines

Symptoms of esophagitis

These symptoms can occur with esophagitis:

- Pain when swallowing, or trouble swallowing
- Pain behind your breastbone (heartburn)
- Acid regurgitation
- Chronic sore throat
- Gum inflammation
- Cavities
- Bad breath
- Nausea
- Pain in your upper belly (abdomen)
- Bleeding (indicated by bright red vomit or black, tarry stool)

These symptoms occur more often with reflux esophagitis:

- Coughing, wheezing, or asthma
- Hoarseness or laryngitis

Diagnosis of esophagitis

Your healthcare provider will ask about your past health, recent infections or illnesses, and your symptoms. You'll also be examined. Sometimes you may need certain tests, such as:

- **Upper endoscopy.** A thin, flexible tube with a tiny light and camera is used. It's put into the mouth down into the esophagus. This lets the provider look for damage. A small sample of tissue (biopsy) may also be taken. The sample is sent to a lab for testing.
- **Upper gastrointestinal (GI) X-ray with barium.** An X-ray is done after you drink a white, chalky substance called barium. Barium helps make problems in the esophagus easier to see on an X-ray. This shows if there are changes like sores (ulcers) or narrowing (stricture) of the esophagus from GERD.
- **Esophageal pH.** A soft, thin tube is passed into the esophagus through the nose or mouth for 24 hours. It measures the acid level in the esophagus.
- **Esophageal manometry.** A soft, thin tube is passed into the esophagus through the nose or mouth. It measures muscle contractions in the esophagus.

Treatment of esophagitis

Medicines. Different medicines can help treat esophagitis. The medicine used will depend on the type and cause of esophagitis you have. Talk with your healthcare provider.

Lifestyle changes. Making these changes can help reduce irritation and ease your symptoms:

- Limit or don't eat:
 - Spicy foods (pepper, chili powder, curry)
 - Hard foods (nuts, crackers, raw vegetables)
 - Acidic foods and drinks (tomatoes, citrus fruits and juices)
 - High-fat foods
 - Chocolate
 - Peppermint
- Until you can swallow without pain, stick to a combined liquid and soft diet. Try foods such as cooked cereals, mashed potatoes, and soups.
- Take small bites and chew your food well.
- Don't eat large meals or heavy meals at night. Don't lie down within 2 to 3 hours of eating.

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- Get to or stay at a healthy weight.
 - Stay away from alcohol, caffeine, and smoking or tobacco products.
 - Brush your teeth at least twice a day and floss every day.
 - Raise your upper body by 4 to 6 inches when lying in bed. This can be done using a foam wedge. Or put blocks or bed risers under the legs at the head of your bed.

Surgery. This may be needed for severe reflux esophagitis. Other noninvasive procedures to treat GERD and esophagitis are being studied. Your provider can tell you more.

Why treatment is important

Without treatment, esophagitis can get worse, especially if you have severe reflux esophagitis. Ongoing symptoms can cause scarring of the esophagus. Over time, scarring can lead to a narrowing of the esophagus (stricture). This can make it hard to pass food down to the stomach. As symptoms go on, they can also cause changes in the lining of the esophagus. These changes can put you at a slightly higher risk of cancer of the esophagus.