

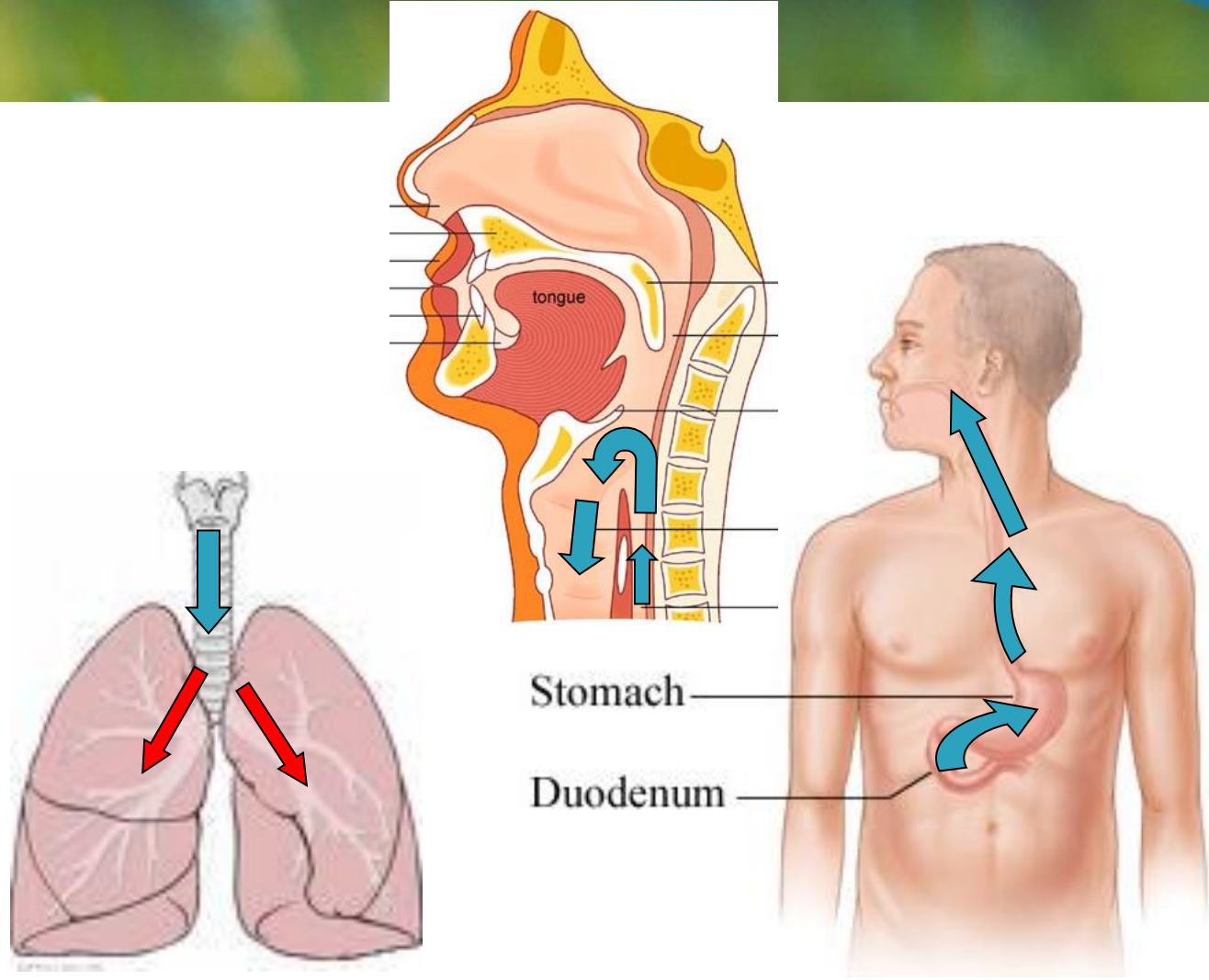
# Dietary intake, physical activity and posture effects on non-invasive measures of reflux

Dr. Iain Brownlee

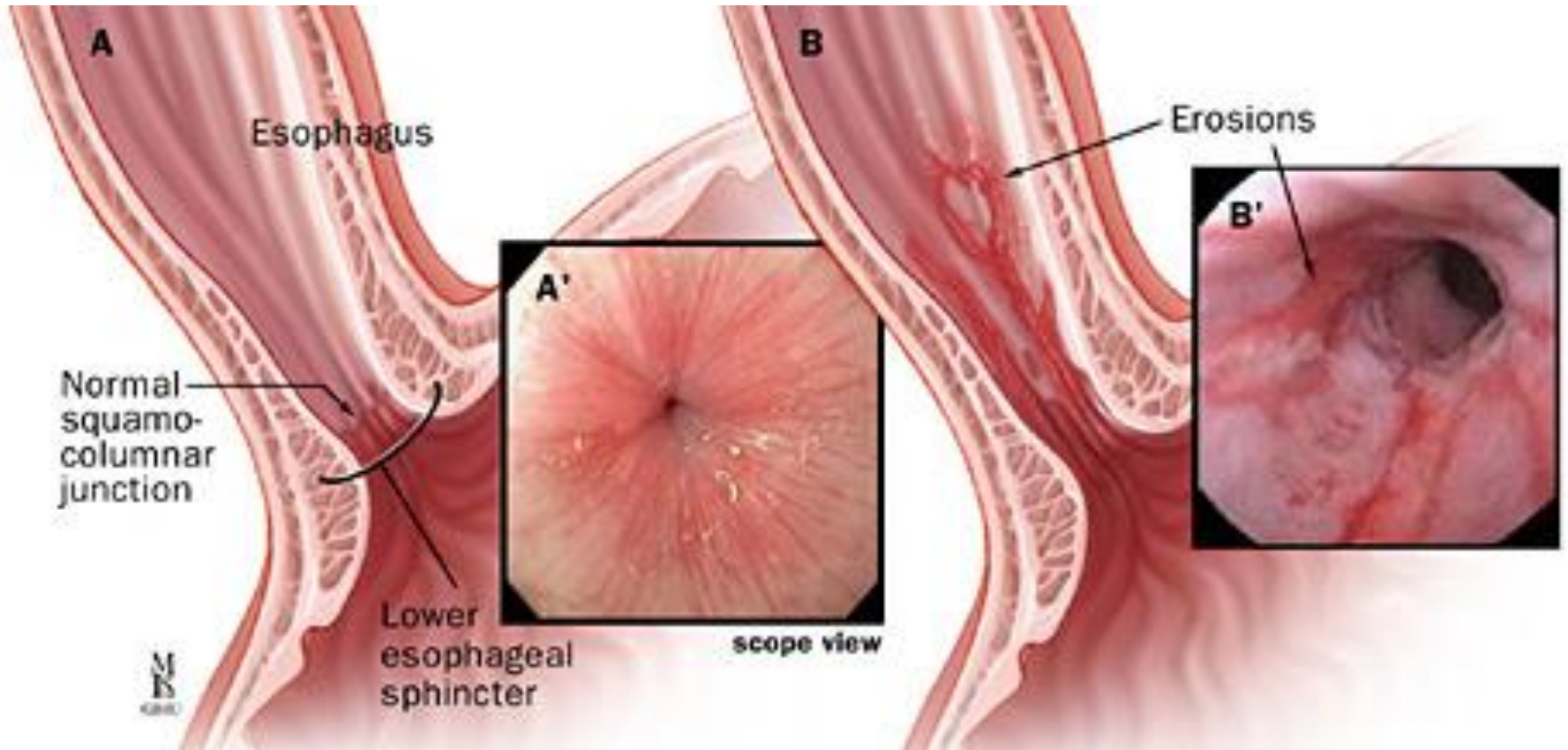
[iain.brownlee@ncl.ac.uk](mailto:iain.brownlee@ncl.ac.uk)

# Background

# Gastric reflux



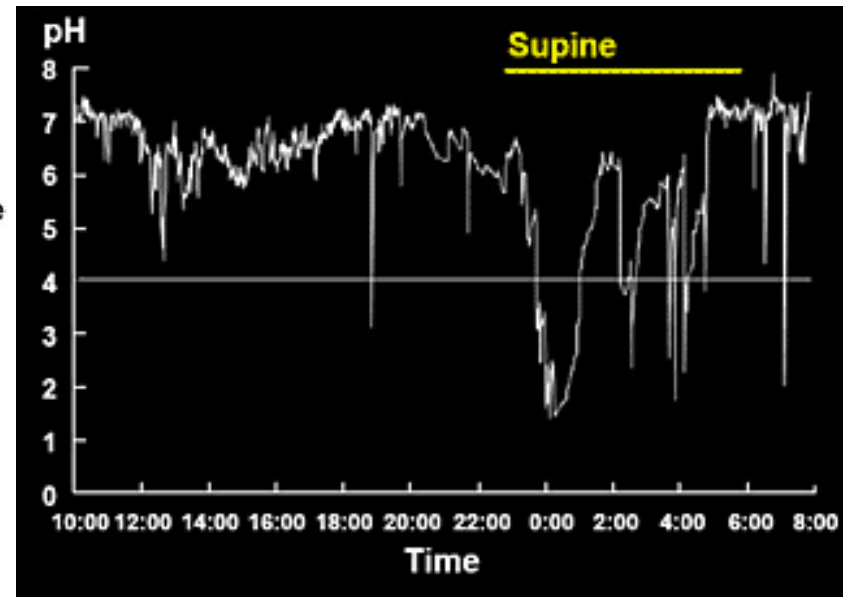
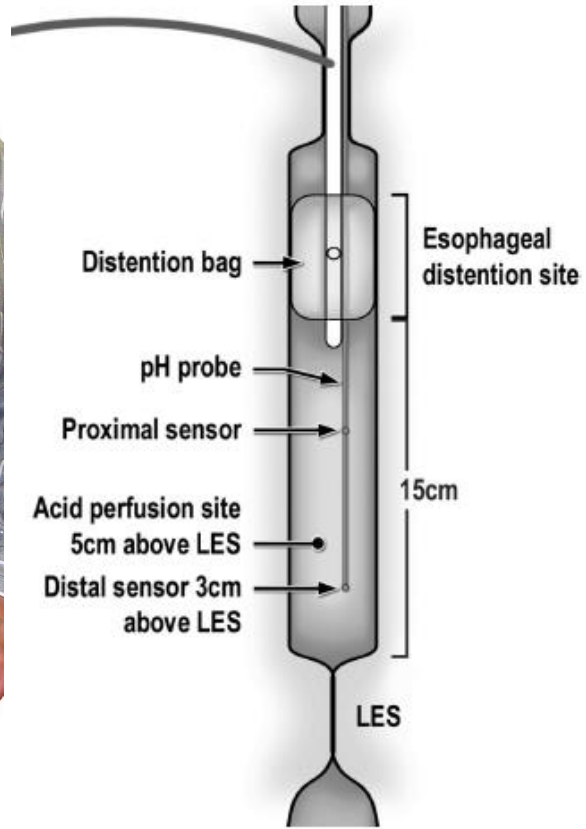
# Erosive oesophagitis



# "Silent" reflux

- ▶ = Clinically silent
  - No pain in oesophagus
  - No oesophageal presentation
- ▶ Reflux can reach other areas from the oesophagus (extra-oesophageal reflux)
- ▶ Gastric juice most likely to damage:
  - unprotected areas
  - areas where it stays

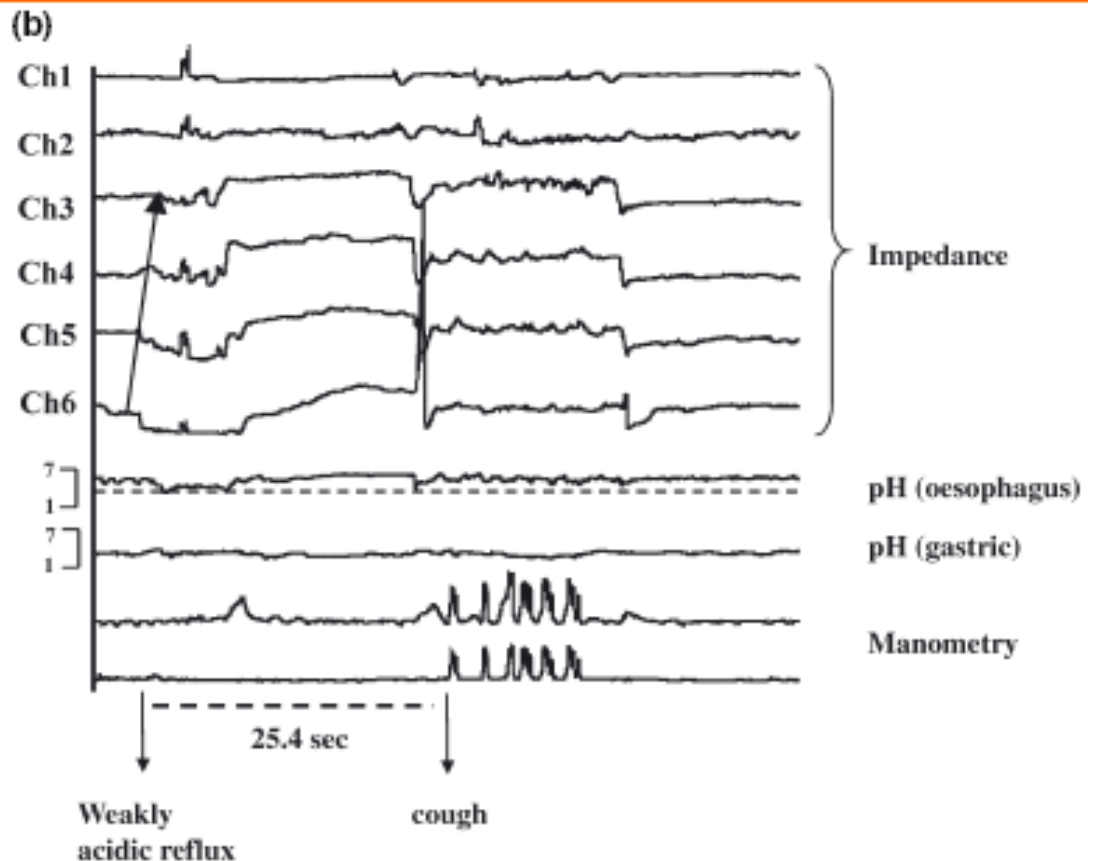
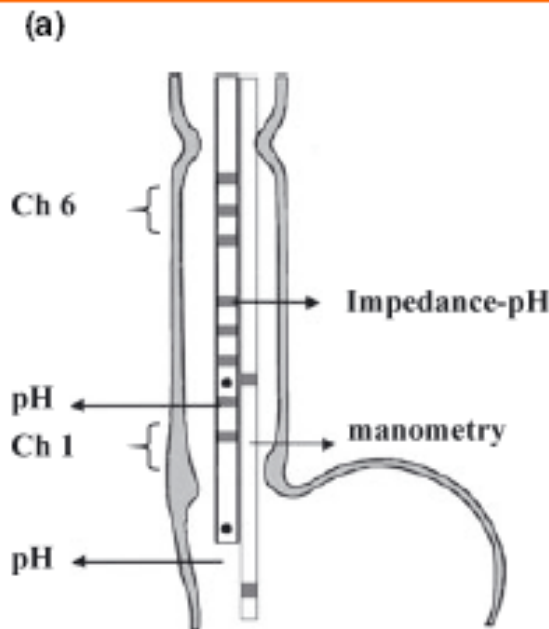
# Reflux measurement



# Reflux measurement

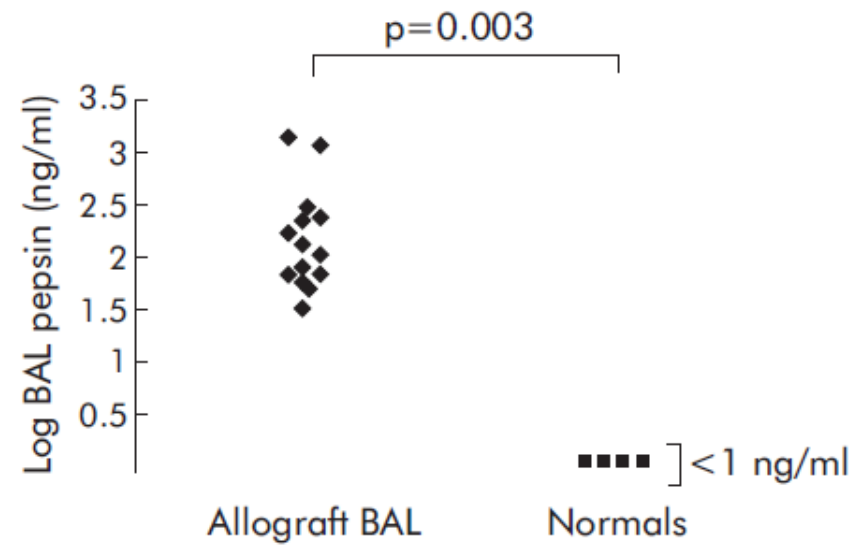
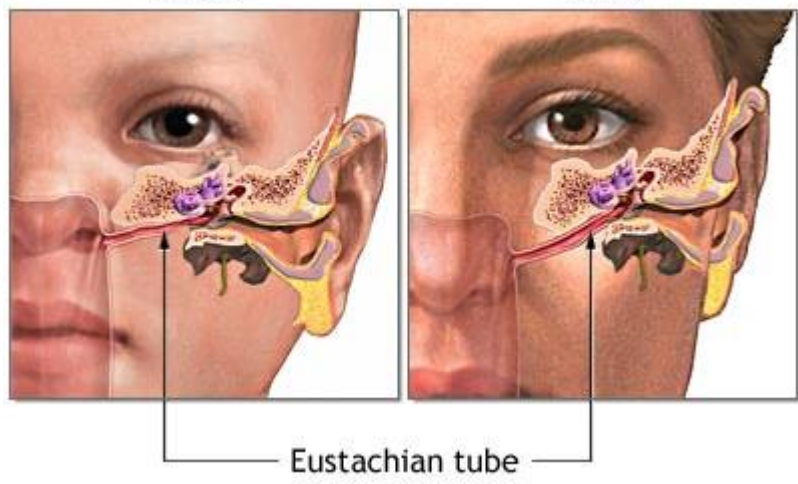
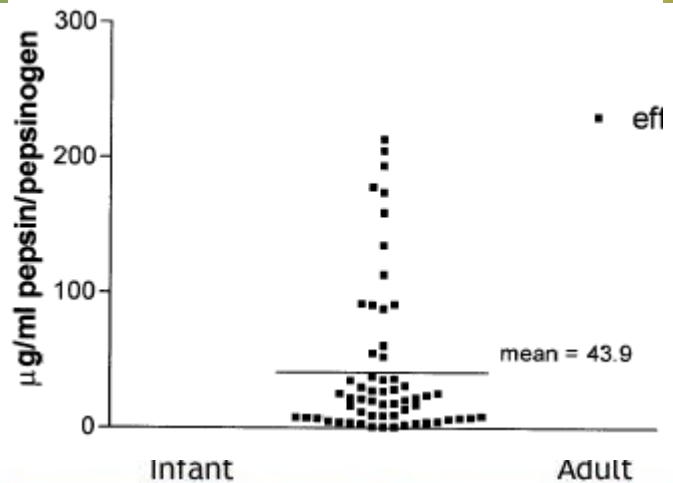
Medscape®

www.medscape.com



Source: Aliment Pharmacol Ther © 2007 Blackwell Publishing

# Reflux measurement





# Reflux treatment

1

- Lifestyle

2

- Pharmacological

3

- Surgical

# Lifestyle factors

- ▶ Dietary intake
  - Spicy foods?
  - Acidic foods?
  - Fatty foods?
  - Alcohol?
- ▶ Sleep
  - Sleep on left hand side
  - Put bricks under your bed
- ▶ Physical activity
  - Reduced and moderate intensity?

Koufman JA (2010) *Annals of Otology, Rhinology & Laryngology* **120**

# Study design

# Aims

- ▶ Test saliva samples for the presence of pepsin in healthy individuals in relation to:
  - Dietary intake
  - Physical activity
  - Posture (before and after sleep)

# Saliva sampling

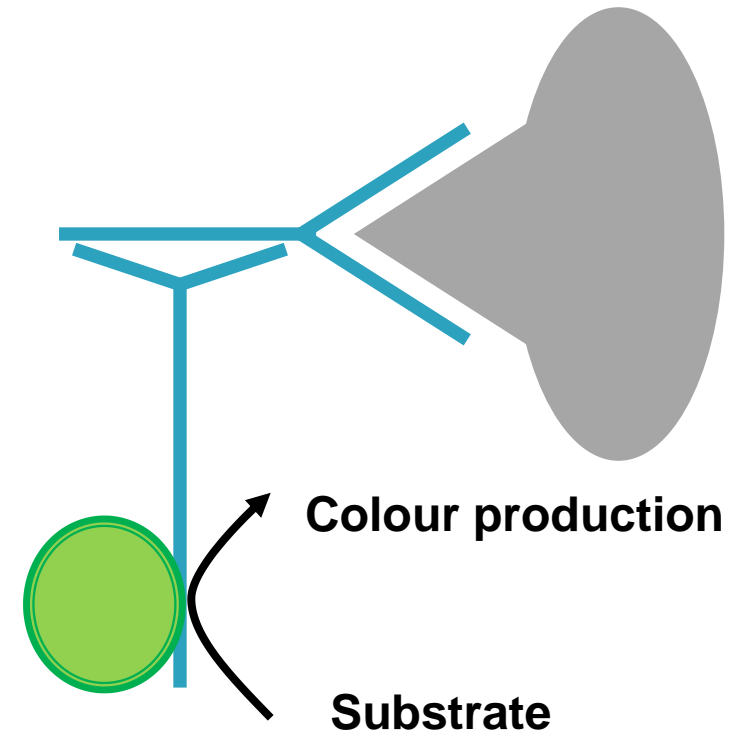
- ▶ Collect over 7 days before & after
  - Meals
  - Physical activity
  - Sleep
- ▶ Samples collected in 30 ml screwtop tubes
  - Citrate as preservative
  - Ziplock bags to seal
- ▶ c.1 ml of saliva collected



[www.rdbiomed.com](http://www.rdbiomed.com)

# Sample handling and analysis

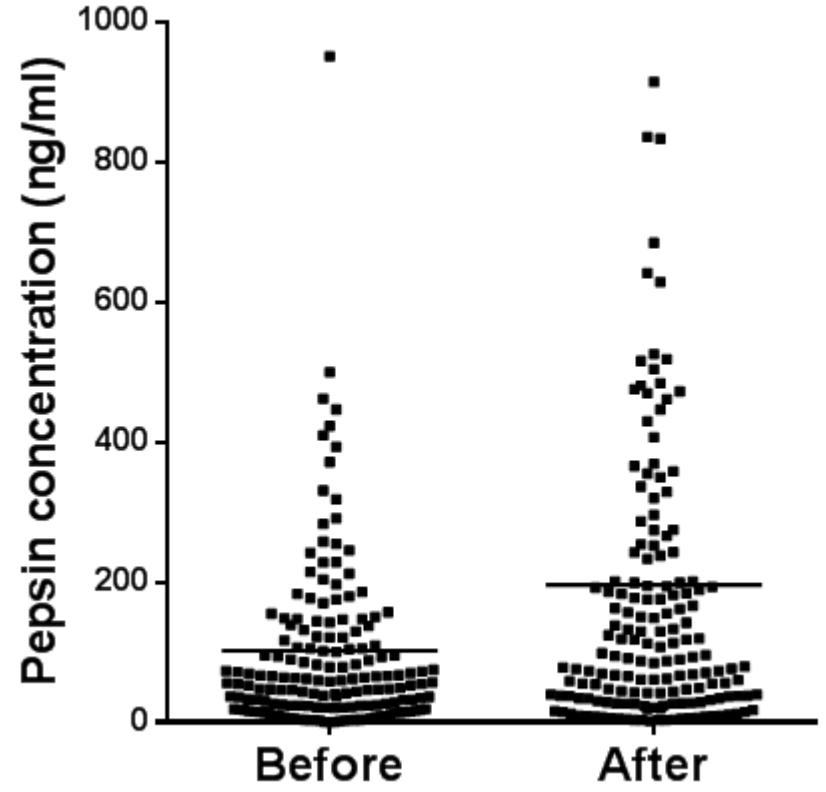
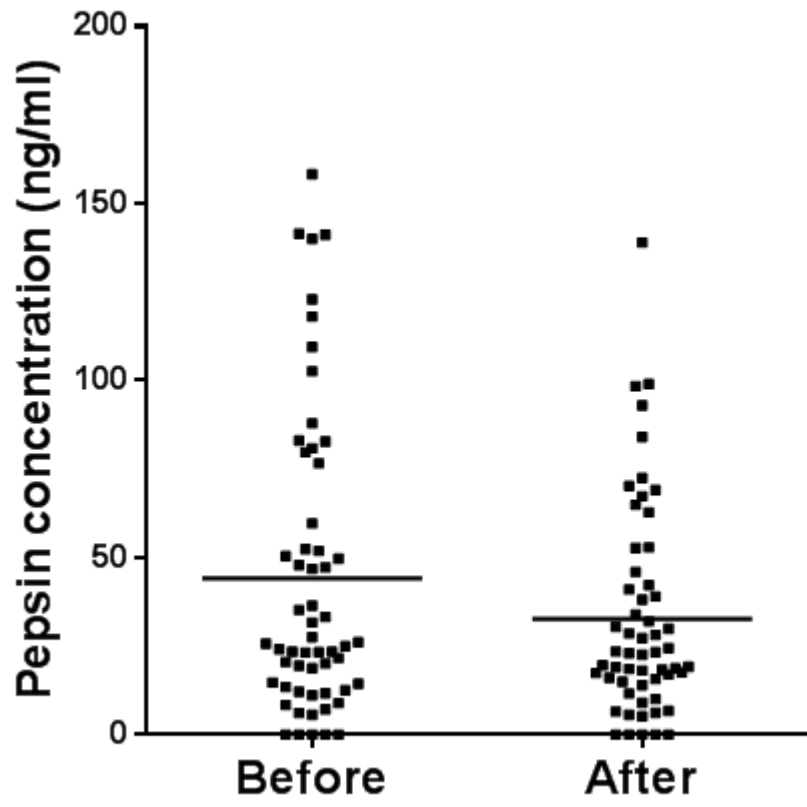
- ▶ Sample centrifuged
  - Remove cellular debris
  - Remove particulate matter
- ▶ Supernatant tested for pepsin
  - Indirect ELISA
  - 96-well plates



# Major findings and discussion

# Meal intake

# Sleep





# Summary

- ▶  $[\text{pepsin}]_{\text{saliva}}$  was significantly higher pre-meal than post-meal ( $P = 0.037$ )
  - Possible effect of cephalic phase of digestion?
- ▶  $[\text{pepsin}]_{\text{saliva}}$  occur was significantly higher post-sleep than pre-sleep ( $P < 0.001$ )
  - Recumbant posture likely to drive reflux events
  - Consideration of reduced saliva production also necessary
- ▶ No impact of physical activity bouts on  $[\text{pepsin}]_{\text{saliva}}$ 
  - Low physical activity intensity noted in participants

# Interpretation

- ▶ Detectable  $[\text{pepsin}]_{\text{saliva}}$  occur frequently at sampling times assessed here
- ▶ Diet, physical activity and posture are all likely to affect circadian reflux occurrence
- ▶ Consideration of “abnormal” measures not possible from current findings
- ▶ Further “challenge” studies warranted