

24<sup>th</sup> International Conference on

# Clinical Nutrition

March 04-06, 2019 | Barcelona, Spain



## Anas G Al Hariri

Al Dhafra Hospitals, UAE

### Laryngopharyngeal Reflux (LPR) diet

GER and its sequela, GERD & LPR are common disorders in children and occur in otherwise-healthy infants as well as in medically complex older children. GER: Infantile GER is generally a transient and benign process that fully resolves as a function of growth and development. GERD is a retrograde transit of gastric contents into the esophagus that occurs with or without regurgitation to the pharynx or vomiting. LPR is the retrograde passage of gastric contents into the laryngopharynx, leading to symptoms referable to the larynx/ hypopharynx. Management of GERD & LPR in children: Several treatment options are available for controlling symptoms and preventing complications, The choice among them depends upon:

- The patient's age
- The type and severity of symptoms
- Response to treatment

Lifestyle Changes: As an initial approach to treatment for children with mild or infrequent symptoms (GER). Lifestyle changes also may be helpful as pharmacologic treatment in patients with moderate or severe symptoms suggestive of (LPR or GERD).

- Weight loss or weight management for individuals who are overweight
- Head of bed elevation: This is important for individuals with nocturnal or laryngeal symptoms. (In infant no need to, only supine not prone position)

Dietary modification:

Trial of avoidance: chocolate, peppermint and caffeinated beverages, that may reduce lower esophageal sphincter pressure. Acidic beverages, including Coca colas and orange juices, avoidance of high fat foods.

- Positioning: Avoid the supine position soon after eating 3-4 hours
- Promote salivation by either chewing gum or using oral lozenges
- Avoid alcohol and tobacco (including passive exposure to tobacco smoke)

### Biography

Anas Ghonem Alhariri has completed his Master's degree from Damascuss University and postdoctoral studies from ALMuassat Damascuss University School of Medicine. He is the HOD of Madinet Zayes Hospital, Abu Dhabi SEHA-UAE. He has Arab Board certificate at 2005, European Board certification fellowship at 2013 from Austria. He is now working in Abu Dhabi-UAE- SEHA facility as ENT Consultant HAAD and MOH Licensed since 2015.

[anasgh72@yahoo.com](mailto:anasgh72@yahoo.com)