

Metabolic Syndrome and GERD

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Metabolic syndrome correlates to several gastrointestinal disorders, and in usual has an increased body mass index (BMI). Gastroesophageal reflux disease (GERD) is a spectrum disease with long-term need of treatment. It is getting popular in Taiwan during the recent one decade. Based on recent evidences, elevated BMI has been predisposed to have GERD, and even with a relatively limited control after therapy for such patients. In general, for the clinical care to the GERD subjects, there are 6 strategies to assist the reminding of clinicians to control of GERD, including PHD-MLB abbreviated for: P: to apply Proton-pump inhibitor (PPI), H: survey of *Helicobacter pylori* and eradicate it before or during the long-term treatment of PPI, and D: define the exact spectrum of the GERD aspects of the patients. After enrollment for treatment, the monitoring (M) to the daily symptoms, life style modification (L), and body mass index adjustment (B) could serve to improve the control. Nevertheless, there remains hard work to care about the GERD, including the NERD and atypical aspects. For the patients with elevated BMI as either overweight or obesity, the control of GERD is relatively limited, and in need of either BMI reduction or adding up of PPI dosage to improve the achievement of sustained symptomatic response. There is thus a subset of GERD subjective to get better after adding up of dosage of PPI, as the overcoming of the CYP2C19 story for the overweight or obese body mass index (BMI).