

A Prospective Study of the Prevalence, Severity and Risk Factors for GERD in Pregnancy

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Background:

Previous studies using subjective reporting, identified the prevalence of GERD in pregnancy to be 30-50%. However, the severity of these symptoms has not been assessed during the stages of pregnancy.

Aims:

To prospectively determine the prevalence, severity and risk factors for GERD during pregnancy using a validated GERD symptom questionnaire.

Methods:

Pregnant women were recruited from two multi-provider practices, starting in 4/03. Subjects completed the Gastroesophageal Reflux Disease Symptom Assessment Scale (GSAS) questionnaire, in addition to a brief medical profile. The GSAS measured 15 GERD related symptoms, frequency, and distress. Higher scores reflected more severe symptoms. GSAS and medical update questionnaires were repeated during each trimester and at 6 to 8 weeks post-partum.

Results:

To date 70 women have been recruited into the study and first trimester data were analyzed on 50 subjects, ages 19-43 (mean 29), 91% white, 7% black, 2% Hispanic, 74% multigravida. Ten percent had a previous diagnosis of GERD, 52% reported GERD symptoms during previous pregnancies, (64% treated with over-the-counter medications, none used prescription medications, and 36% were untreated). At baseline 19% were actively smoking, 32% used caffeinated beverages daily. In the first trimester, 44% of women reported GERD symptoms. Total number of symptoms ranged from 0-13 (maximum 15), mean 6 (SD 3). GSAS scores for distress and bother ranged from 0.07 to 2.27 (range 0-3), with mean of 0.52 (SD 0.42). There were no differences in GSAS scores based on BMI, GERD during previous pregnancies, smoking, and caffeine use ($p>0.05$)

Conclusions:

Over 40% of women report GERD symptoms during the first trimester of pregnancy, however, distress and bother related to these symptoms were low. The severity of symptoms was not affected by BMI, previous history of GERD in pregnancy, smoking or caffeine use. Over 50% of women reported GERD symptoms in previous pregnancies, which were untreated or managed with over-the-counter medications. Studies are on-going to assess the incidence rates of GERD during the latter stages of pregnancy.