Information for patients

Dyspepsia (Indigestion)

This is general advice to help avoid the symptoms of dyspepsia, to support advice given to you by health professionals. If you need more detailed advice or if you are following a special diet which makes this advice difficult, please ask your doctor to refer you to a registered dietitian.

What is dyspepsia?

Dyspepsia is also known as indigestion. Symptoms of dyspepsia are caused by acid leaking from the stomach into the oesophagus (gullet), also known as 'acid reflux', where it causes pain, or a feeling of discomfort in your chest or stomach, often described as 'heartburn'. Common symptoms of dyspepsia include feeling full or bloated, nausea (feeling sick), belching (burping) and/or bringing up food or bitter-tasting fluids into your mouth.

There are several reasons why you may suffer with the symptoms of dyspepsia. Lifestyle and diet are the important factors covered by this information sheet.

You should discuss your symptoms with your GP if you:

- keep getting indigestion and if you are relying on the over-the-counter medications at least twice a week for long periods
- are in severe pain
- are 55 or older
- have lost a lot of weight without meaning to
- experience difficulty swallowing (dysphagia)
- keep being sick (vomiting)
- have unexplained iron deficiency anaemia
- feel like you have a lump in your throat or your stomach

- have bloody vomit or poo
- have a family history of either oesophageal or stomach cancer

These symptoms can be a sign of something more serious and it is worth discussing it with your GP.

Dietary strategies to consider for dyspepsia:

- **Avoid over eating and having large meals** – having smaller and more regular meals, for example 5-6 smaller meals spread across a day, may help to prevent overfilling your stomach.
- **Avoid skipping meals**
- **Avoid eating late at night** – allow at least three hours between your last meal of the day and going to bed.
- **Avoid rushing meals** – eat your meals slowly and chew your food well before swallowing.
- **Avoid drinking with a meal** - drink in between meals instead to reduce the volume going into your stomach at one time.
- **Avoid excess alcohol intake** – avoid drinking more than 14 units per week on a regular basis. See your GP for advice about reducing alcohol intake or visit www.drinkaware.co.uk
- **Complete a 7-day food and symptom diary** – this may help you identify food or lifestyle triggers responsible for your symptoms. If you are due an appointment with a dietitian, it might be beneficial to bring it along with you.

The following are **commonly known to cause symptoms** of dyspepsia:

- Caffeine – aim for <3 cups daily- try decaffeinated alternatives to tea and coffee and herbal teas such as fruit or peppermint tea
- Very spicy foods – consider adding flavour to meals instead- use more herbs, turmeric, paprika
- Very hot or very cold foods or drinks
- Fizzy drinks and alcohol
- Citrus fruit/juices and tomatoes
- Chocolate
- High fat meals e.g. deep-fried foods – instead use grilling, baking or poaching

Many of the foods listed above can be safely left out of your diet. If you end up cutting out lots of foods and you are worried that your diet has become unbalanced or unhealthy, try re-introducing one food at a time to see if it suits you. If this does not work, ask your GP or nurse to refer you to a Dietitian.

Lifestyle strategies to consider for dyspepsia:

- **Maintain a healthy BMI (18.5-25.0kg/m^2)** - being overweight can increase your risk of indigestion and acid reflux. Ask your GP surgery for what local support is available or visit https://feelgoodsuffolk.co.uk/

- **Avoid exercising, laying down or bending soon after meals**
- **Cut down or stop smoking completely** - Ask your GP surgery about what cessation support is available.
- **Prop the head of your bed up** - avoid lying flat or try laying on your left-hand side to prevent the acid from coming up your oesophagus (food pipe) .
- **Avoid tight fitting clothes**
- **Reduce stress levels -** If you think stress may be impacting on your symptoms, help can be found on the NHS choices website https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/feelings-and-symptoms/stress/ or visit https://www.wellbeingnands.co.uk/suffolk/
- **Avoid being constipated** – ensure bowels are well managed as constipation may worsen dyspepsia. Speak to your GP for further advice.

Changes to lifestyle can be difficult and it is suggested that you aim to make one change at a time, especially if you have a lot of changes to make. Start with the easiest and make that change part of your regular lifestyle before making another change.

Other strategies for dyspepsia:

- **Avoid taking non-steroidal anti-inflammatory drugs** such as ibuprofen, aspirin, naproxen or diclofenac – these can make indigestion worse.
- Medicines that help reduce acid in your stomach include:
  - **Antacids** – these help to neutralize the acid, such as Rennie and Gaviscon.
  - **Proton pump inhibitors** – these help to reduce the production of stomach acid, such as Omeprazole or Lansoprazole.

Speak to a pharmacist about the different types of over-the-counter medications that may be helpful.

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the hospital website www.wsh.nhs.uk , or visit the disabledgo website: http://www.disabledgo.com/organisations/west-suffolk-nhs-foundation-trust/main

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