Recommendations for Patients with Ineffective Esophageal Motility

You have been diagnosed with ineffective esophageal motility (IEM or hypotensive peristalsis). This relatively common disorder can predispose people to dysphagia (swallowing difficulty) and reflux.

Causes of ineffective esophageal motility (IEM) include:
1. Advancing age (presbyesophagus)
2. The prolonged effect of acid reflux over time
3. Diabetes
4. Achalasia
5. Scleroderma
6. Polymyositis
7. Parkinson’s Disease
8. Amyotrophic Lateral Sclerosis (ALS)
9. Chagas Disease
10. Medications

Symptoms of esophageal dysmotility can mimic gastroesophageal and extraesophageal reflux disease. These symptoms include heartburn, dysphagia, regurgitation, cough, throat clearing, excessive throat mucus, globus (sensation of a lump in the throat), and hoarseness. It is important to diagnose IEM as a cause of these symptoms because these symptoms do not improve with traditional anti-reflux medication and can get much worse with surgical anti-reflux therapy. Antacids and proton pump inhibitors do not usually help. They may be prescribed, however, to prevent further esophageal damage.

If you have IEM you must realize that you cannot eat a regular meal like most individuals. If you eat a large meal at one sitting, a significant proportion of the food may sit in your esophagus for a very long time. The food can regurgitate out of the esophagus and cause cough, heartburn, symptoms in the throat, and even aspiration into the lungs.

Behavioral modifications are essential and include:
1. Eat small, frequent meals. Avoid large or medium sized meals.
2. Never lay down after eating. The food sitting in your esophagus can regurgitate and end up in your lungs. Give yourself 3 hours after eating before laying down.
4. Be very careful about taking pills. Pills can spend a long time in your esophagus and cause significant damage. Swallow pills with a large amount of water (8-12 oz) and
remain upright for 1 hr after taking them. You may also try getting liquid formulations of your medicines if possible. Compounding pharmacies can make almost any medication in liquid form.

5. Eat sitting completely upright only as gravity can help empty the esophagus.
6. Avoid acidic foods. The acidic foods can pool in your esophagus and make symptoms worse.
7. Exercise before meals (not after) and lose weight. Exercising after meals may exacerbate your symptoms and should be avoided.
8. Swallow only once per bite. Avoid double swallows as taking a second swallow can diminish esophageal motility. Wait 15 seconds after every swallow before initiating a second swallow.