

# Speech therapy can reduce the number of reflux episodes: A proof of concept study

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The aim of this study is to assess the number of supragastric belches and reflux episodes before and after speech therapy in GERD patients with troublesome belching symptoms due to an increased number of supragastric belches.

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Will not start
<b>Health condition type</b>	Gastrointestinal motility and defaecation conditions
<b>Study type</b>	Observational invasive

## Summary

### ID

NL-OMON35503

### Source

ToetsingOnline

### Brief title

Speech therapy and GERD

### Condition

- Gastrointestinal motility and defaecation conditions

### Synonym

belching, heartburn

### Research involving

Human

### Sponsors and support

**Primary sponsor:** Academisch Medisch Centrum

**Source(s) of monetary or material Support:** Ministerie van OC&W

## Intervention

**Keyword:** belching, GERD, speech therapy

## Outcome measures

### Primary outcome

The number of supragastric belches before and after treatment

The number of liquid reflux episodes

### Secondary outcome

Symptoms as assessed by questionnaires

## Study description

### Background summary

The majority of belches originates from the stomach. However, in some patients the eructated air does not originate from the stomach but is sucked or injected in the esophagus from the pharynx and expelled immediately afterwards in oral direction again. This behavior is called supragastric belching because the air does not originate from the stomach and does not reach the stomach either<sup>1</sup>. Recently, Hemmink et al demonstrated that supragastric belches can precede gastroesophageal reflux episodes and these authors suggested that supragastric belches could elicit reflux episodes<sup>2</sup>.

Patients with severe and excessive belching as a main symptom are characterized by an increased frequency of supragastric belches. A recent study performed in our center demonstrated that supragastric belches are also associated with troublesome belching in GERD patients. Speech therapy can decrease severity of belching symptoms in patients with excessive supragastric belching. In GERD patients with a demonstrated increased frequency of supragastric belches, there is currently no evidence based treatment available. Speech therapy can potentially be helpful and is therefore the only therapeutic option available in this subgroup of GERD patients.

We hypothesize that speech therapy reduces troublesome belching symptoms in GERD patients by reducing the number of supragastric belches. Furthermore, we hypothesize that a reduction in supragastric belches also reduces the number of reflux episodes.

### Study objective

The aim of this study is to assess the number of supragastric belches and reflux episodes before and after speech therapy in GERD patients with troublesome belching symptoms due to an increased number of supragastric belches.

### **Study design**

A prospective study using impedance measurements.

### **Study burden and risks**

Patient will undergo an ambulatory impedance measurement. This is free of risk.

## **Contacts**

### **Public**

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## **Trial sites**

### **Listed location countries**

Netherlands

## **Eligibility criteria**

### **Age**

Adults (18-64 years)

Elderly (65 years and older)

## Inclusion criteria

>10 supragastric belches preceding reflux episodes (<1s)

## Exclusion criteria

Severe motility disorders of the esophagus

## Study design

### Design

**Study type:** Observational invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Treatment

### Recruitment

NL

Recruitment status: Will not start

Enrollment: 30

Type: Actual

## Ethics review

Approved WMO

Application type: First submission

Review commission: METC Amsterdam UMC

## Study registrations

**Followed up by the following (possibly more current) registration**

No registrations found.

## Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register	ID
CCMO	NL37631.018.11