

REFLUX ISN'T AN ACID PROBLEM: A FUNCTIONAL MEDICINE PERSPECTIVE



For many people, reflux starts as an occasional annoyance — a bit of burning after a meal, discomfort at night, the need to prop up pillows. Slowly, almost imperceptibly, it becomes normal. Medication is added. Life adjusts. The symptom quietens, but the question is rarely asked: "Why is this happening?"

The Symptom-Management Trap

Modern medicine excels at emergency and crisis care. When it comes to chronic digestive symptoms — reflux, IBS, bloating, fatigue, joint pain, skin conditions — the system often defaults to symptom suppression.

For reflux, that usually means antacids or proton pump inhibitors (PPIs).

These medications can be incredibly useful short-term tools. But tools are not destinations. When acid suppression becomes a long-term strategy without investigation, the underlying drivers continue unchecked.

Relief without resolution eventually runs out.

Reflux Is Often a Pressure and Digestion Problem

Despite how it feels, reflux is rarely caused by "too much" stomach acid.

In functional medicine, reflux is more often linked to:

- Poor food breakdown
- Delayed gastric emptying
- Fermentation of food in the stomach
- Excess gas production
- Altered gut motility

When food isn't broken down efficiently, it sits in the stomach longer than it should. Fermentation

produces gas. Pressure builds. That pressure pushes stomach contents — including acid — upward into the oesophagus.

The burning is real. The cause is misunderstood.

What Long-Term Acid Suppression Actually Does

Stomach acid plays several critical roles:

- Activates pepsin to digest protein
- Signals the pancreas to release digestive enzymes
- Triggers bile flow from the gallbladder
- Acts as a barrier against pathogenic microbes

Research has shown that PPIs:

- Reduce stomach acidity from a pH of ~1 to ~4
- Shrink the stomach's acid pocket by roughly one third
- Significantly increase the risk of gut dysbiosis and SIBO

One clinical trial demonstrated that 50% of long-term PPI users tested positive for SIBO, compared to just 6% in healthy controls — an over 800% increase in risk.

Lower acid means weaker digestion, altered bile flow, impaired microbial control, and more fermentation — the very conditions that worsen reflux long term.

The Gut Microbiome's Role in Reflux

Reflux is often driven by microbial imbalance, but that imbalance doesn't always look the same.

Some people develop overgrowths of gas-producing bacteria. Others, develop deficiency dysbiosis — a lack of beneficial microbes that:

- Support digestion
- Regulate hunger hormones
- Calm inflammation
- Communicate with the brain

Both patterns disrupt digestion. Both create pressure. Both perpetuate reflux.

This is why functional medicine prioritises testing over guessing.

Why Dieting and Avoidance Miss the Point

Many people are told to:

- Lose weight
- Avoid fat
- Cut alcohol

Avoid entire food groups indefinitely

Sometimes these strategies help. Often, they don't.

Elimination in functional medicine is not punishment — it's investigation. Short-term removal followed by structured reintroduction provides data. Your body becomes the feedback system.

When digestion improves and the microbiome is restored, many foods once blamed for reflux become tolerable again.

The Gut-Brain-Hormone Connection

The gut doesn't just digest food. It regulates:

- Hunger and satiety hormones (insulin, leptin, ghrelin)
- Inflammation
- Immune activity
- Brain signalling

When gut function improves, people often experience unexpected benefits:

- Steadier appetite signals
- Reduced joint pain
- Sustainable weight loss without restriction
- Improved energy and mood

These are not coincidences. They are system-wide effects of restored physiology.

A Functional Medicine Approach to Healing Reflux

In functional medicine, reflux is addressed by:

- Investigating digestion, motility, bile flow, and microbiome balance
- Supporting safe, gradual reduction of acid suppression medication when appropriate
- Rebuilding digestive capacity with enzymes, bile support, and nutrients
- Correcting microbial imbalances
- Using food as a tool for restoration, not fear

Healing is rarely instant — but it is sustainable.

Symptoms Are Signals

Reflux is not a personal failure.

It is not a lack of willpower.

It is not something you should simply learn to live with.

Symptoms are information. When we listen instead of silence them, the body often responds with more than relief — it responds with resilience.

Relief is good. Resolution is better.

If reflux has quietly become your normal, it may be time to ask a different question — not what turns this down, but what's driving this in the first place.

To learn more about functional digestive care, visit www.centrefordigestivehealth.com.

Listen to this podcast: [Healing from reflux](#)