

Gastroesophageal Reflux Disease Associated with Smoking and Alcohol Consumption

Nevila Tabaku Luli^{1,*}, Ilir Bibolli², Elizana Petrela³

¹*Department of Internal Medicine, Rajonal Hospital of Shkodra;* ²*Department of Gastrohepatology, Hospital Center "Mother Teresa", Faculty of Medicine, Tirana;* ³*Department of Statistic, Faculty of Medicine, Tirana*

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Abstract Gastroesophageal reflux disease has been associated with an increased risk of physical complications from gastroesophageal reflux. The knowledge of risk factors may help to distinguish patients with an increased risk of endoscopic lesions of the esophagus and, as a result, a higher risk of developing physical complications from GERD. This is of particular importance to the occurrence of BE, as a risk factor of the oesophageal adenocarcinoma. Our aim was to identify associations between GERD and its subgroups (NERD, eGERD, Barrett esophagus) and evaluation of the association between various risk factors including lifestyle factor as smoking and alcohol consumption. In this study, patients were recruited at Rajonal Hospital of Shkodra. Following an assessment of medical history, all patients underwent an digestive endoscopy. As a result, total of 255 patients (53% male, age 51.90 ± 9.65) were included. In regression analysis, the main factors related to the occurrence of the three GERD subgroups (nonerosive, erosive disease, and BE) were age, gender, duration of GERD, body mass index (BMI), smoking. There was statistically significant difference between patients with esophagitis and Barrett, and without esophagitis with regard to the use of cigarette smoking ($p < 0.001$). Regarding alcohol consumption, we observed that patients with erosive esophagitis and Barrett's esophagus were bigger users of alcohol, but this difference was not statistically significant ($p = 0.244$). The findings indicate that smoking in conjunction with other risk factors, are consistently and independently related to the subgroups of GERD. Although alcohol consumption failed to reach statistical significance, remains an important factor related to the occurrence of eGERD and Barrett.

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*Corresponding: E-Mail: nevila.luli@yahoo.com, Tel: 00355692282140; Fax: 0035522247289