

# YOUR HOME REMEDY FOR ACID REFLUX DISEASE

LIVE, EAT AND HEAL ABUNDANTLY



*Harness the power you already have*

*Keep eating the foods you love*

*No protocols or regimens to follow*

*100 percent natural*

**DR. HOWARD CHRISTIAN**

# **Your Home Remedy for Acid Reflux Disease**

Live, Eat and Heal Abundantly

Howard Christian Ph.D.

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## **Part I: Why We Need a New Understanding of Disease**

*“We have severed mind and body from story and disease. In Western culture, this severance is several centuries underway and the cost to individual and community health is enormous.”*

— Dr. Brian Broom, MindBody luminary



ONE

## Dear Reader,

**T**hank you—and thank yourself. By purchasing *Your Home Remedy for Acid Reflux Disease: Live, Eat and Heal Abundantly*, you have not only placed your trust in me but, more importantly, you have turned up for yourself in a big way!

Whether you're seeking information for yourself or a loved one, understanding acid reflux disease—medically termed gastro-esophageal reflux disease (GERD<sup>1</sup>)—is the first step toward finding relief. The *acid* in acid reflux disease refers to our stomach acid, which can cause distressing symptoms such as heartburn, regurgitation and abdominal discomfort when it is able to flow or *reflux* into the esophagus. When someone experiences regular and/or more intense symptoms, this may indicate underlying *disease*. When disease is present, it is because there is weakness or inappropriate relaxation of the muscle separating the stomach and esophagus whose role it is to keep stomach acid from flowing into the esophagus.

The intention of this self-help guide is to show you how to heal acid reflux disease (hereafter referred to as GERD). And by *heal*, I don't just mean in the book's subtitle. I am talking about a complete resolution of your symptoms and with it the freedom to live and eat abundantly. Added benefits may include a growing feeling of aliveness and a deeper connection with yourself and those around you.

As a former biomedical scientist, I understand that these statements may cause considerable resistance for some people, especially those with a more skeptical bent. It is natural that anyone new to the practical and surprisingly effortless approach to well-being that I advocate will have questions and con-

cerns. Starting with the chapters *GERD—the dualistic biomedical perspective*, *GERD—opening to a MindBody perspective* and *Exploring a meaning-based story approach*, this book addresses many of these concerns.

As a self-help guide, this book shows you how to connect with your innate capacity for self-healing. If you want to be empowered through this ability to understand and work on your health yourself, ***Your Home Remedy for Acid Reflux Disease: Live, Eat and Heal Abundantly*** will be instrumental to that journey. To see if the moment is right for you to step into a wholeperson approach that addresses your health issues, ask if you recognize yourself in any one of these people:

- I am new to my struggle with GERD and seeking direction, or I have extensive experience but still struggle with daily symptoms.
- I want to reduce dependence on GERD medications while maintaining current treatments, and I am concerned about side effects.
- I have tried conventional treatments, dietary changes, or lifestyle modifications without satisfactory results.
- I seek to understand the root causes of my GERD rather than just managing its symptoms, and I want to find meaning to support my well-being journey.

I have written this book with you in mind, wherever you are in your journey to heal from the strictures GERD places on you and your choices. When I healed my GERD in 2008, I did so through uncovering its **meaning**. This meaning was unique to me and did not come about by following a prescriptive path.

I am not going to present you with prescriptive advice, as that is for your doctor. And if you choose to follow a dietary plan or another lifestyle intervention while working through this book, then good for you. It is important to continue following your intuition; this is integral to healing your GERD and has guided you on your journey thus far. The unique approach that I do offer will draw you toward a deep understanding of personal meaning, empowering you to chart your own course to an abundant life free of GERD and other illnesses you may

be struggling with. The one hundred percent natural remedy you will learn does not require you to change your lifestyle or give up eating the foods you love. But you will have to change your perspective on several health-related ideas that have persisted for generations to everyone's detriment.

**Your Home Remedy for Acid Reflux Disease: Live, Eat and Heal Abundantly** is intended as a journey that you can undertake in your own space and at your own pace. As for any book, you can take breaks—even extended ones—before returning to the journey whenever you are ready. A lot of your healing will occur during your breaks from the book and will result from fresh insights about your disease, as well as increased self-knowledge and intuition, which are natural elements of any healing journey.

## Healing GERD and other illnesses

When I write about healing GERD, I do so from *actual* experience. I come from a place of humility, having experienced the pain of GERD as well as a constellation of other illnesses and their symptoms, which kept me alternately powerless, in pain, and trapped. My career had me focused on being the objectively-informed “expert” in my chosen fields of immunology and biomedicine, a stance which left me all the more confused and frustrated as my suffering—and that of those around me—increased without abatement. Writing this book is my way of sharing what I now know and helping others to understand the meaningful basis of their own illnesses—whether physical or psychological—so they can find healing too.

It is my sincere belief that immersing yourself in this book's accessible ideas will help you to achieve the same healing from GERD and other serious illnesses as I have. It is a journey of profound personal growth that bridges the physical, mental and emotional domains of our experience. It is a journey to wholeness. As you embark on your own transformative path, know that your innate resilience and determination to achieve a healthier, more fulfilling life informs each step toward healing and empowerment.

I will teach you to journey more consciously with your GERD and begin to unpack its meaningful connections with your story. This meaning-based story approach is the same approach that I used in 2008 to heal my own GERD, and live and eat more abundantly.

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1. GERD is also known as gastro-oesophageal reflux disease (GORD) in Australia, Ireland, New Zealand and the United Kingdom.

Two

## **GERD—the Dualistic Biomedical Perspective**

For an introduction to acid reflux and an explanation of terms such as “acid reflux disease” and “GERD,” please refer to the *Author’s note on terms*, as well as the *Glossary*.

### **How biomedicine sees GERD**

Most people experience mild reflux symptoms on occasion. However, the fact that you are reading this book suggests you or someone you love has bothersome, ongoing reflux symptoms, and may have been diagnosed with GERD.

The influential, dualistic “mind separate from body” biomedical perspective regards GERD as a chronic, persistent medical illness requiring ongoing treatment to manage symptoms. A GERD diagnosis is typically made when someone experiences mild acid reflux symptoms at least twice a week, or moderate-to-severe symptoms at least once per week. GERD can lead to complications like inflammation of the esophagus (esophagitis), a pre-cancerous condition called Barrett’s esophagus, and esophageal cancer. Other potential complications include narrowing or tightening of the esophagus, asthma, and dental problems such as gum disease and tooth erosion.

For a person to experience the significant and frequent symptoms associated with GERD, there is an underlying disease process involving the lower

esophageal sphincter (LES). Normally, this narrow muscle band separates the stomach from the esophagus. In people with GERD, however, the LES relaxes inappropriately, allowing stomach acid to flow back up into the esophagus and sometimes as far as the mouth. This acid reflux irritates the esophagus and leads to classic symptoms of heartburn, regurgitation and chest pain.

In addition to classic symptoms, GERD sufferers may also experience difficulty swallowing (dysphagia), the sensation of a lump in the throat (globus sensation), nighttime symptoms of cough and disrupted sleep, and new or worsening asthma. Other symptoms include abdominal pain (dyspepsia), bloating, belching, laryngitis, tooth erosion, and bad breath (halitosis). However, only your doctor can diagnose GERD and if you have not already received a diagnosis, it might be a good idea to arrange a visit. The current medical perspective holds that the anatomical changes to the LES associated with GERD are irreversible and necessitate treatment, including with prescription medications, lifestyle changes such as to diet, and possible surgical intervention in particularly severe cases.

**This self-help guide does not replace the care you receive from your doctor. If you have a new illness or condition, if you have not yet been diagnosed with GERD by a doctor, or if you have not had your symptoms examined and investigated, do not rely exclusively on the information in this book in lieu of seeking medical help.**

As well as running some tests, your doctor may place you on a trial period with a prescription drug, such as a proton pump inhibitor (PPI) or histamine type 2 receptor antagonist (H2RA). PPIs work by blocking the production of stomach acid, whereas H2RAs block the action of histamine, a chemical required for stomach acid production. These drugs can be effective at treating the symptoms of GERD, providing temporary relief from your discomfort. While it is true that all drugs have possible side effects, both of these drug classes are considered to be generally safe for long-term use, if not always effective. If you have any concerns, these are best discussed with your doctor.

Many people try to manage the discomfort of GERD with over-the-counter medications. Although these may be effective in some cases, it is common for people with GERD to need prescription-only medications to better manage their symptoms. So, if you are experiencing frequent or severe GERD symptoms, or are taking over-the-counter medications more than twice a week, please go and see your doctor. I encourage you to get a medical diagnosis and appropriate treatment before using the methods in this book to work towards healing your GERD. In this way, you will continue to receive symptomatic relief while you address the root cause of your disease.

## **Who gets GERD—and why? Epidemiology and risk**

Globally, the number of individuals suffering from GERD and seeking treatment is increasing. Proton pump inhibitors rank among the most widely used medications worldwide. In some regions, GERD has become so prevalent that it is perceived as a cultural norm.<sup>1</sup> The symptoms of GERD are synonymous with indulgence and have such influence on our lives that a thriving industry has grown around various over-the-counter products, as well as prescription medications. We are bombarded with media messages encouraging the use of these quick fixes so we can go about our normal business.

The ignorance of the problem hides a more painful reality, which is that GERD is not a benign illness but a serious and often under-diagnosed disease with a significant impact on quality of life. In 2019, there were an estimated 784 million people living with GERD globally, an increase of almost 80% compared with three decades earlier.<sup>2</sup>

In the US, GERD affects an estimated 18% to 28% of the population, nearly 40% of whom experience persistent symptoms despite ongoing medical treatment. These hard-to-treat patients incur an average of \$10,000 more in health-care costs each year compared with those with more mild GERD symptoms.<sup>3</sup>

Family or genetic factors do have some role in people developing GERD and GERD-related disorders.<sup>4</sup> However, anyone can develop the disease and GERD is one of the most prevalent pathologies doctors see in primary care practice.<sup>5</sup> Although more common in people over age 40, infants and young children can also experience GERD. Today, hospitalizations for GERD including among

children are more common now than ever before, and so too are downstream complications of the disease. In particular, Barrett's esophagus and esophageal cancer appear to be increasing over time.<sup>6</sup>

You may well ask, why is the global prevalence of GERD increasing? The medical research offers a number of possible, inter-related explanations:

### **The population is getting older**

Globally, age-standardized rates of GERD are highest in the US, Italy, New Zealand, northern Latin America, the Caribbean, north Africa, the Middle East, and eastern Europe. Rates are lower in high-income Asia Pacific, east Asia, and some countries in western Europe. When standardized for age, GERD trends appear to be stable, leading epidemiologists to attribute the increased GERD prevalence over time to population growth and an aging population.

However, age does not explain the increasing prevalence in high-income North America or in high-income Asia-Pacific where rates are lower than North America but nevertheless increasing over time.<sup>7</sup> Other factors such as body weight, smoking and alcohol consumption are also not useful in explaining the increasing GERD prevalence in certain regions.

Even if it could be shown that age is a universal factor in increasing GERD prevalence, any such explanation is based on the assumption that disease is an inevitable part of aging, yet many older people enjoy remarkable health and are free of disease.

### **Obesity is on the rise**

In the same way that an aging population might result in more GERD-affected individuals, a population with more individuals with obesity—an accepted risk factor for GERD—will also be associated with more individuals having GERD. But this time, younger people are also affected, yet only modest associations have been found between GERD and people with obesity.<sup>8</sup>

Furthermore, the assumption that GERD prevalence relates to obesity prevalence does not explain why normal weight people and non-obese, overweight people can develop GERD as well.

## Lifestyle assumptions

With the exception of smoking which has shown decreased participation in recent years,<sup>9</sup> the consumption of alcohol<sup>10</sup> and coffee,<sup>11</sup> and eating a diet high in fat<sup>12</sup>—all reasons given for the increasing GERD prevalence—are significant, albeit unevenly distributed, lifestyle factors in the global population.

Yet, the data relating to lifestyle factors and their associated risk with GERD are often conflicting. Certain trigger foods, including coffee for example, are frequently reported to worsen reflux symptoms, but hard evidence linking consumption to GERD is lacking.<sup>13</sup>

Lifestyle assumptions fail to explain the increasing prevalence of GERD in children and people without contributing lifestyle factors.<sup>14</sup>

## Current explanations of GERD are not enough

Despite the abundance of research and speculation, the above explanations are inadequate to guide our understanding of *why* GERD prevalence is increasing in the global population.

Acknowledging the limitations of the biomedical perspective, which takes a population-based approach toward understanding GERD, *individuals* living with the disease will nevertheless have their own unique experiences that may well include established risk factors such as those discussed above. Other risk factors include hiatal hernia, having a connective tissue disorder such as scleroderma, and pregnancy. You may have some or none of these risk factors. GERD symptoms have also been associated with the use of certain drug classes. If you think a drug you are taking is making your symptoms worse, please see your doctor for advice.

## Dietary triggers

Certain lifestyle choices and the consumption of a diet rich in recognized trigger foods may worsen your GERD symptoms. It is not surprising then that health-care practitioners and many GERD sufferers will often recommend a host of

lifestyle suggestions for improving symptoms. These include smoking cessation, eating smaller meals, avoiding foods and drinks that trigger symptoms, remaining upright for a period after each meal, elevating the head of your bed, and avoiding tight-fitting clothing.

Many different dietary triggers have been identified, including no doubt some of your favorite foods. It is not my intention to include an exhaustive list of trigger foods here since there are many GERD-specific cookbooks available that are dedicated to providing symptomatic relief based on dietary restriction. However, it is worthwhile emphasizing that certain trigger foods are more frequently reported than others to worsen GERD symptoms, especially fried and spicy foods, red sauces, citrus, chocolate, onion, garlic, coffee, some teas, carbonated drinks, and alcohol.<sup>15</sup>

The one hundred percent natural remedy that I present has nothing to do with these lifestyle interventions. Instead, you will learn a non-dietary, non-dualistic, lifestyle-affirming “MindBody” or meaning-based story approach to healing your GERD that will allow you to live abundantly and keep eating the foods you love.

## **GERD is more than just a digestive disease**

Where biomedicine is starting to gain ground is in its more recent recognition that GERD may be more than just a digestive disease. A growing body of studies reveals that GERD—along with the functional gastrointestinal disorders like irritable bowel syndrome and functional dyspepsia—is closely linked to the autonomic nervous system (ANS), which regulates involuntary bodily functions like breathing, heart rate, and digestion. These studies indicate that imbalances between the sympathetic nervous system—responsible for the body’s response to stress—and the parasympathetic nervous system—which promotes rest and digestion—could play a significant role in your symptoms.<sup>16,17</sup>

A critical measure of autonomic nervous activity is heart rate variability (HRV). HRV refers to the variation in time between heartbeats, which reflects the balance between a person’s stress (the sympathetic response) and their relax-

ation (the parasympathetic response). A person who is more relaxed will show higher HRV than will a person who is stressed. When our autonomic balance is disrupted, as is now being shown in people with GERD, low HRV is correlated with worsening symptoms.

Understanding the imbalance between the body's sympathetic and parasympathetic systems in GERD is important. It points to the need for a broader view through which to understand a person's GERD and how to more effectively heal it, rather than solely relying on medications that target physical symptoms.

However, where biomedicine now sees an opportunity for better GERD *symptom control*—such as through stress management, relaxation techniques and lifestyle adjustments—I see the opportunity for a unique approach that heals the underlying emotional, psychological *and* physical aspects of your GERD. We therefore need to take a fresh look at what actually causes GERD and how we might benefit from this understanding. Beginning with *GERD—opening to a MindBody perspective* this book will give GERD the fresh perspective it needs.

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## THREE

# GERD—Opening to a MindBody Perspective

### Uncovering personal meaning

As you embark on your healing journey, I'd like to warmly welcome you to a space of renewed understanding and personal empowerment. This chapter invites you to reset your beliefs about GERD, allowing you to affirm the intuition you likely have that your suffering has important personal meaning for you, which is yet to be uncovered. Together, we will explore a fresh, non-dualistic “MindBody” perspective whose ultimate aim is to nurture your experience of wholeness, and pave the way for a healthier, happier life.

The MindBody perspective I refer to is about making connections between the *subjective* aspects of your story and your GERD symptoms. When we think about subjectivity, it describes our own uniqueness, the ways in which we know ourselves and our experiences. Because no two people—and no two people's diseases—are the same, exploring this inner subjectivity means that we can approach our disease from our own unique vantage point. When you recognize the connections between your subjective story and symptoms, you can uncover deeper, personal meaning that facilitates healing.<sup>1</sup>

The reason why we need a non-dualistic perspective is that the people we contemporarily rely upon for our healing—doctors—are trained only to look for and see our signs and symptoms (the body part of dualism). A global industry has been built around the evidence-based research, diagnosis, measurement, and treatment of this physical aspect of our suffering. On the other hand,

doctors ignore the subjective aspects of our story and suffering due to their training (the mind part of dualism). There is no similar industry built around the self-practice-based evidence of our inner subjectivity. Unfortunately, what doctors cannot see they also cannot attend to. And without being able to see *both* a person's story *and* their symptoms in the same "space" (i.e., the "bodymind" of the wholeperson) there can be no connections which form the vital link to healing and wholeness.

We will explore this inner subjectivity and its connections in ways that you can apply to your own unique story. This MindBody approach—hereafter referred to as a **meaning-based story approach**—is founded on a non-dualistic understanding of reality in which mind and body are not treated as separate compartments, but rather are seen as being inseparable aspects or domains of the wholeperson.

This is the same approach that I used to heal GERD and other illnesses besides. It wasn't always easy: I had to acquire knowledge to gain certain insights, and an important growth edge for me involved developing my creativity and imagination, two things we have in abundance as children, but unlearn as we become more self-critical and skeptical as adults.

*"Imagination is everything. It is the key to coming attractions."*

— Albert Einstein

I'd like to take pains to let you know that, first and foremost, your self-kindness will enrich your own journey. So too will your creativity and imagination. Remember this if things ever get a little tough. You've come this far, you're ready, you've got what it takes. And the journey is totally worth your effort!

## **GERD is not the enemy**

Because we live in a world of contradictions, I venture the opinion that the more we believe we need to be "fixed", then the more we resist our efforts to be fixed. The quality that underlies this need for fixing is often hedged in guilt and shame. While these feelings have their uses, they are also powerful antagonists to our healing that must be addressed along our journeys (see: *Working with feelings*).

It is imperative that we stop seeing our disease as the enemy. It is not. There are no enemies here. In the same way that a meaning-based story approach to well-being can work together with the dualistic “mind separate from body” biomedical perspective of healthcare,<sup>2</sup> so too can you learn to embrace your disease. It is not a case of me or my disease, with one claiming victory over the other. A more helpful and measured approach is to regard your disease with a sense of curious detachment, an open awareness that does not require you to pit one idea or state of thinking against another in the name of “curing” or “fixing” your disease.

When we do see GERD as the enemy, all we are ever going to recognize are its symptoms. This is because we have been conditioned over our lifetime to see symptoms as something to control, diminish, suppress, medicate, or fix. And all our disease will ever give us in return is resistance, persistence, defiance, and brokenness. This is the opposite of detachment: It is a fear-based attachment that only has one victor, and in this paradigm the disease always wins.

But when we open to the idea of GERD being a messenger for personal meaning that enables us to experience ourselves in a different way, then we take an important step in bridging the connections between our symptoms and story. So don't shoot the messenger!

Accepting your journey in whatever its form requires being open to vulnerability. Being vulnerable is not weakness, but instead a form of openness we all need if we are to take strength from our stride. If vulnerability is a problem for you—men, be honest with yourselves here—I recommend watching two of the most viewed TEDx talks of all time given by Brené Brown.<sup>3,4</sup>

## **Challenges, risks and rewards**

As for any fresh exploration, you may be concerned about possible risks in following the ideas presented herein. The reality is that the increased self-awareness that accompanies a meaning-based story approach to healing brings enormous benefits in physical and psychosocial well-being, self-agency, relationships, motivation, and purpose. But self-awareness is a two-edged sword that also brings potential downsides or risks. These risks include depression, worsening physical symptoms, and shifting dynamics in your important relationships.

## Depression

Depression may arise as you shift the emphasis of your experience of GERD away from its physical symptoms toward the underlying issues that inform your story. As part of healing my GERD, along with resolving the physical symptoms, I experienced a purging of intense feelings that I had been holding onto. For me, this was invigorating. But I also understand that the release of strong feelings can cause considerable discomfort for some people.

This self-help book is geared to help you work through any accompanying feelings, including depression. My own and many other people's experiences of following a meaning-based story approach are that as our physical symptoms improve, any significant feelings are also supported.

**IMPORTANT: If you become significantly depressed or you believe that your existing depression is worsening, or you have suicidal thoughts, tell someone then seek immediate help from an appropriately qualified health professional.**

## Worsening physical symptoms

As with any serious illness, your GERD symptoms are best monitored and managed by your doctor. As I have taken care to explain, this self-help book is not intended to replace medical care. Seeking help from an appropriately qualified medical professional does not hinder you in any way from using this book with the intention of healing your GERD.

This process does not require you to think and act using an either/or approach. Rather, one approach complements the other until you experience complete healing of your disease.

I have found that the best time to work on a disease is when symptoms are flaring. This is when we are motivated to achieve a shift, and when our disease has our full attention. Overall, my own and other people's experiences are that

symptoms do not become any worse than at their peak before we start working with our stories.

## **Relationships**

Relationships are right at the heart of our lives. As you embark on your self-healing journey, doubtless you will discover important feelings that have implications for different relationships. This is the true nature of personal growth and is a healthy consequence of the changes we are prepared to make for ourselves.

As I later explain in depth, GERD symptoms often reflect relationship patterns and struggles of which we have been unaware. It is possible that in going deeply into your story, you might feel that you need to choose between better health and having stability in your relationships.

If this begins to feel true for you, it is a further example of the either/or thinking that can narrow our possibilities in life: Either I can enjoy better health but my relationships will suffer; or I will have to live with my GERD but at least my relationships remain the same.

The reality is that your physical GERD symptoms can be a consequence of you burying or swallowing uncomfortable feelings that might otherwise create conflict in certain relationships. Addressing these feelings is key to your personal growth. With this shift in perspective, you now have expanded options: I can have better physical health AND improved interpersonal relationships.

## **Embracing the self-healing journey**

Engaging in self-healing using a meaning-based story approach may lead to periods of turmoil and discomfort, including the specific challenges mentioned above. At one end of the spectrum of possibilities, you might uncover feelings that, when expressed appropriately and assertively, can resolve quickly alongside your symptoms. At the opposite extreme, you may confront deeply rooted issues that could significantly impact certain relationships. Allowing for discomfort at any part of the spectrum is important because this discomfort is not only essential for your healing, but also for your personal growth in general.

Recognizing that you hold personal responsibility for your discomfort and any associated feelings allows you to approach various situations with greater wisdom and insight. If you encounter feelings that are overwhelming or insurmountable, it's important to remain open to seeking help from a skilled therapist who can guide you through these challenges.

As we navigate the complexities of our emotional landscape, it is useful to acknowledge that the difficulties we experience with certain feelings often stem from past experiences of personal hurt or loss. These feelings are often contained in memories that cast shadows on our present, leading us to view them through a lens of fear or apprehension. Acknowledging this connection allows us to understand that while our feelings may be overwhelming now, they are rooted in our history rather than our current reality.

If there is an ageless wisdom we can turn to at this point, it is that as we are hurt in relationship, so too are we healed in relationship. This profound truth reflects the interconnectedness of all experience. Personal growth, while often fraught with difficulties, brings with it immense rewards—new insights, deeper connections, and a more authentic sense of self. Ultimately, embracing both the challenges and the benefits of this journey can lead to profound transformation and fulfillment.

### **Easy or difficult, it's the journey itself that matters**

There is no set pace to your self-healing journey. Some people will want to move quickly, others prefer a meandering pace. Sometimes the seriousness of someone's GERD reflects the complexity of their story. But this is not always the case. There is no real way to predict how quickly or slowly we can process our personal, subjective material. How fast one moves through anything is of no importance. You will be best served to embark on your self-help journey at your own pace. As Spanish poet Antonio Machado once wrote, "Traveler, there is no path, the path is made by walking." My role simply is to remind you to keep taking steps, the exact nature of which will be unique for everyone.

You may find that you easily make connections between your story and symptoms, and may notice immediate improvements in your GERD symptoms. Having made these connections, you may not need all the assistance on

offer. Or you may find that healing occurs more gradually, with symptoms improving over weeks or even months. It could be that your physical symptoms disappear, yet you feel that there is more of your story to unpack in order to resolve all the issues behind your illness.

Whatever velocity you move through life, it's only the journey itself that matters. Your unique circumstances such as your motivation and energy levels, the degree to which you identify with—or are attached to—your GERD, and the time you have had GERD will not count against you; they simply inform your journey. Anyone who is committed to holding a broad view of their illness will eventually come to see the connections between their story and symptoms.

The key message here is that rather than finding reasons as to why your symptoms might persist, you need to embrace your symptoms for the wisdom they represent. After all, your symptoms have brought you this far. The destination you are pursuing—the point at which you are healed from GERD—is unknown. The only thing that matters then is the journey, not the destination.

### **Exercise 3.1: Check-in for increased self-awareness**

Self check-ins can be performed for a variety of reasons, including for increased self-awareness, emotional regulation, goal alignment, and encouraging self-compassion. I've included a self check-in exercise here because it's a good time to find out how you feel about this fresh perspective and whether your own GERD symptoms are flaring in response to any early connections being made with your story.

So take a moment to check in with yourself right now.

1. Start in a comfortable position, sitting or lying, in a quiet space where you won't be disturbed. Allow your body to relax, and close your eyes if you feel comfortable doing so.
2. Take a deep breath in through your nose, allowing your abdomen to expand. Hold for a moment, then exhale slowly through your mouth. Repeat this deep breathing for

three full rounds, feeling the tension in your body begin to dissipate.

3. Shift your awareness to your body, starting at the top of your head and slowly moving downwards. Notice any areas of tension or discomfort, particularly around your chest and abdomen, which may relate to your GERD. Acknowledge these sensations without judgment, just observing what you feel.
4. Now, bring your awareness to any strong feelings around your GERD. Allow these to surface without trying to change them. Simply acknowledge their presence.
5. Shift your awareness to your thoughts. What thoughts arise when you think about your GERD and a possible connection between your story and your symptoms? Observe these thoughts, recognizing them for what they are but not allowing yourself to engage with them or get swept away by them.
6. Consider what fresh insights might be available to you right now. How do these affect your understanding of your symptoms? Take a moment to reflect on how this new perspective influences your feelings about GERD and your approach moving forward.
7. In closing, take a few deep breaths, expressing gratitude toward yourself for taking this opportunity to reflect and check in. When you're ready, open your eyes and return to your surroundings.

This exercise can be revisited whenever you need to reconnect with yourself or to connect more deeply with your experiences with GERD. An alternative to this exercise is after you get to Step 5 and before you move to Step 6, ask yourself which of your significant

interpersonal relationships come to mind while thinking about your symptoms? If you feel the start of panic or you need to resist what you are thinking and feeling, that is okay. Remind yourself that you are safe, that it is normal and acceptable to experience strong feelings and know that these feelings will pass.

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