

## **Study: Over-Diagnosis of GERD Leads to Needless Meds**

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### Over-Diagnosis of Reflux in Infants Leads to Needless Medication

Calling gastroesophageal reflux a disease increases parents' wish for medication, symptoms are frequently over-treated in infants, according to new research

Ann Arbor, Mich. — Medications used to treat gastroesophageal reflux disease, or GERD, are some of the most widely used medications in children less than one year old.

But in a new study, researchers from the University of Michigan and the University of Missouri concluded that physicians often label common symptoms in infants, such as crying and spitting up, as disease. Frequent use of the GERD label can lead to overuse of medication, according to study published online today ahead of print in the journal *Pediatrics*.

The study found that doctors' use of the label GERD prompted parents to request medication for their baby even when they had been advised that the medication would probably be ineffective.

"As doctors we need to appreciate that the words we use when talking with patients and parents have power – the power to make a normal process seem like a disease. As pediatricians, our job is to make sick children healthy, not to make healthy children sick," says Tarini, who also is an investigator in U-M's Child Health Evaluation and Research Unit.

In the study, researchers surveyed parents coming into a pediatric clinic in Michigan about how they would respond to a hypothetical clinical scenario describing an infant who cries and spits up excessively but is otherwise healthy. Parents were randomly assigned to receive one of multiple vignettes. In some vignettes, the doctor gave a diagnosis of GERD; in others the doctor did not provide a disease label.

Additionally, half the parents were told that existing medications are probably ineffective; the rest were not given information about medication effectiveness. Parents who received a GERD diagnosis were interested in medicating their infant, even when told that medications were ineffective. Parents not given a disease label were interested in a prescription only when the doctor did not discuss whether the medication was effective.

Over-diagnosis of GERD can make a medical condition out of a normal behavior, says lead author Laura Scherer, assistant professor of psychological science in the College of Arts and Science at the University of Missouri.

“The growing digestive systems of an infant can be finicky and cause the child to regurgitate. The discomfort can cause the infant to cry, but it is not necessarily a disease,” says Scherer. “Parents can learn from this study that a disease label can make them want medication for their child, regardless of whether the drugs are effective or not. Parents should follow doctors’ advice, which sometimes means accepting a doctor’s explanation of why an infant’s crying and vomiting may be normal.

“Unnecessary use of medication is costly,” says Scherer. “Especially for families without insurance, the over-use of medications can be a needless expense. In addition, the long-term side effects of the medication frequently prescribed to children diagnosed with GERD have not been fully studied, although the medication has been correlated to slightly higher rates of pneumonia.”

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