

Gastroesophageal reflux disease

Enfermedad por reflujo gastroesofágico

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Gastroesophageal reflux disease (GERD) is one of the most prevalent digestive disorders worldwide and is a leading reason for medical care in Mexico. With a prevalence ranging from 10% to 20% in the general population of Western countries, and similar figures reported in Mexican studies, GERD not only significantly affects patients' quality of life but also imposes a considerable economic burden on healthcare systems.

The relevance of dedicating a complete volume of *Clínicas de Gastroenterología de México* to GERD stems from multiple factors. First, the sustained increase in its incidence, particularly associated with rising obesity rates, changes in dietary patterns, and the sedentary lifestyle characteristic of modern societies. Second, the complexity of its clinical presentation, which ranges from typical symptoms such as heartburn and regurgitation to extraesophageal manifestations that may involve the respiratory, otolaryngological, and dental systems. Third, the constant evolution in understanding its pathophysiology, which has introduced innovative concepts such as the esophageal-brain axis and the role of esophageal microbiota.

Furthermore, GERD presents unique challenges in the Mexican context. The genetic, dietary, and socioeconomic factors specific to our population influence both the presentation and the response to treatment of this disease. The high prevalence of obesity in Mexico,

which reaches an alarming rates of 36.1% in adults according to ENSANUT 2018, establishes a complex scenario for GERD management.

The economic impact of GERD is substantial. Direct costs include medical consultations, diagnostic tests, proton pump inhibitor therapy, and, in selected cases, endoscopic or surgical procedures. Indirect costs, arising from work absenteeism and decreased productivity, further aggravate the economic burden. In the United States of America, GERD is estimated to generate annual costs exceeding \$15 billion, a figure that also poses a significant challenge for the Mexican healthcare system as well.

The complexity of GERD management has evolved considerably in recent years. The traditional paradigm focused solely on acid suppression has given way to a more comprehensive approach that considers the phenotypic heterogeneity of the disease, associated comorbidities, and patient preferences. The emergence of new therapeutic options, from potassium-competitive blockers to minimally invasive endoscopic and surgical therapies, requires constant updating of medical knowledge.

In this context, the present volume of *Clínicas de Gastroenterología de México* emerges as a response to the need for an updated, comprehensive, and contextualized review of GERD. We have convened the most distinguished Mexican specialists in gastroenterology, each with recognized expertise in specific

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Date of reception: 24-09-2025

Date of acceptance: 24-10-2025

DOI: 10.24875/CGME.M2500023

Available online: 11-02-2026

Clín. Gastroenterol. Méx. (Eng). 2025;1(3):185-186

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aspects of this disease, to offer a complete and up-to-date perspective on the state of knowledge in the diagnosis and treatment of GERD.

The volume is structured in 11 chapters, coordinated by Drs. Miguel Ángel Valdovinos Díaz and Luis Raúl Valdovinos García, whose authors provide a thorough and systematic coverage of all relevant aspects of GERD. Dr. José María Remes-Troche begins with a review of the epidemiology and socio-economic impact of GERD, establishing the conceptual foundations of the disease. Next, Dr. Josealberto Arenas-Martínez presents updated pathophysiological mechanisms, including innovative concepts such as the esophageal-brain axis and the role of esophageal microbiota. Dr. Genaro Vázquez Elizondo addresses the contemporary classification of different GERD phenotypes, from erosive and non-erosive forms to Barrett's esophagus and refractory GERD. The complete clinical spectrum and diagnostic tools are reviewed by Dr. Luis Raúl Valdovinos García, incorporating the most recent criteria, such as the Lyon Score. Esophageal and extraesophageal complications, including emerging topics such as their relevance to lung transplantation, are analyzed by Dr. Eduardo Cerda.

Comprehensive management includes evidence-based lifestyle modifications, presented by Dr. José Luis Tamayo-De la Cuesta, followed by an exhaustive review of the pharmacological therapies by Dr. Miguel Ángel Valdovinos Díaz, ranging from traditional proton pump inhibitors to new potassium-competitive blockers. Endoscopic treatment options are detailed by Dr. Octavio Aguilar, while Dr. Gonzalo Manuel Torres Villalobos presents surgical alternatives, including innovative techniques such as LINX and EndoStim.

The volume addresses the specific aspects of management in special populations in the work of Dr. Francisco Huerta, addressing pediatrics, geriatrics, and pregnancy. The complex interrelationship with comorbidities such as obesity and respiratory disorders is analyzed by Dr. Gustavo Torres. Finally, Dr. Mónica Zavala closes with a perspective toward the future, exploring emerging therapies, artificial intelligence, and predictive biomarkers.

This volume represents the collective effort of the most distinguished Mexican gastroenterologists to provide a comprehensive, updated, and contextualized overview of GERD. Each chapter has been carefully structured to offer not only a theoretical review of the topic but also practical applications that can be implemented in everyday clinical practice. GERD will continue to be a significant challenge for healthcare systems in the coming decades. Population aging, increasing obesity rates, and changes in dietary and lifestyle patterns suggest that its prevalence will continue to rise. In this context, ongoing medical education and regular updating of knowledge are essential.

We hope that this volume of *Clínicas de Gastroenterología de México* will serve as a valuable resource for gastroenterologists, internists, general practitioners, and other healthcare professionals involved in the management of patients with GERD. Our objective is to contribute to improving the quality of medical care and, ultimately, the quality of life of the millions of Mexicans who suffer from this disease.

Evidence-based medicine should be our guide, but always adapted to the Mexican context and applied with the humanism that characterizes excellent medical practice. This volume represents one more step in that direction.