

## Acta Medica Europa

## Dyspepsia Myths

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Dear Editor,

Dyspepsia, the often-misunderstood umbrella term for chronic indigestion, casts a shadow over many lives. While its discomfort might seem straightforward, the narratives surrounding it are often shrouded in myths and misconceptions. This letter aims to shed light on the realities of dyspepsia, dispelling harmful myths and promoting informed awareness for both individuals and healthcare professionals. One pervasive myth paints dyspepsia as solely a dietary issue, solely triggered by spicy foods or overindulgence. While certain dietary factors can exacerbate symptoms, attributing the condition solely to food choices overlooks the complex interplay of biological, environmental, and psychological factors that contribute to its development. This harmful narrative can lead to feelings of blame and guilt, hindering effective diagnosis and management (1-4).

Another myth portrays dyspepsia as a harmless nuisance, simply an inconvenience to be endured. However, ignoring chronic indigestion can have serious consequences. Dyspepsia can be a symptom of underlying medical conditions, including peptic ulcers, gastroesophageal reflux disease (GERD), and even anxiety or depression. Early diagnosis and appropriate management of these underlying causes are crucial for preventing complications and improving overall well-being. Furthermore, attributing dyspepsia solely to age is a misconception. While the prevalence increases with age, it can affect individuals of all ages. Dismissing younger individuals' concerns based on age stereotypes can delay diagnosis and appropriate treatment. Therefore, navigating the landscape of dyspepsia requires a clear-eyed approach: Empowering individuals with accurate information: Dispelling myths awareness campaigns and promoting communication with healthcare professionals are crucial steps towards informed self-management and seeking appropriate help. Recognizing the complexity of the condition: Moving beyond simplistic explanations and acknowledging the diverse factors influencing dyspepsia is essential for effective diagnosis and treatment plans. Encouraging early diagnosis and investigation: Seeking medical evaluation for persistent or worsening symptoms is crucial for identifying potential underlying causes and preventing complications. Promoting comprehensive management: Addressing dietary triggers, lifestyle modifications, stress management techniques, and, when necessary, appropriate medication can significantly improve quality of life for individuals with dyspepsia. In conclusion, dyspepsia is more than just an occasional bout of indigestion (4-7).

By dispelling myths, promoting awareness, and encouraging early diagnosis and comprehensive management, we can empower individuals to navigate this often-misunderstood condition effectively. Through informed choices, open communication, and access to appropriate healthcare, individuals with dyspepsia can find relief from discomfort and embrace a brighter future.

## REFERENCES

- Enck P, Azpiroz F, Boeckxstaens G, et al. Functional dyspepsia. Nat Rev Dis Primers. 2017;3:17081. Published 2017 Nov 3. doi:10.1038/nrdp.2017.81
- Talley NJ. Non-ulcer dyspepsia: myths and realities. Aliment Pharmacol Ther. 1991;5 Suppl 1:145-162. doi:10.1111/j.1365-2036.1991.tb00757.x
- Cangemi DJ, Lacy BE. Gastroparesis: Myths, Misconceptions, and Management. Clin Exp Gastroenterol. 2023;16:65-78. Published 2023 Jun 6. doi:10.2147/CEG.S362879
- Hunt RH, Lanas A, Stichtenoth DO, Scarpignato C. Myths and facts in the use of anti-inflammatory drugs. Ann Med. 2009;41(6):423-437. doi:10.1080/07853890902887295
- Locke GR 3rd. Nonulcer dyspepsia: what it is and what it is not. Mayo Clin Proc. 1999;74(10):1011-1015. doi:10.4065/74.10.1011
- Scrimshaw NS, Murray E. Tolerancia a la lactosa y el consumo de leche: mitos y realidades [Lactose tolerance and milk consumption: myths and realities]. Arch Latinoam Nutr. 1988;38(3):543-567.
- Valenkevich LN, Iakhontov OI. Sovremennye mify klinicheskoĭ gastroéntorologii [Modern myths of clinical gastroenterology]. Eksp Klin Gastroenterol. 2004;(3):72-105.