

Clinical Indications for Proton Pump Inhibitors and Tapering Information When Indicated

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Appropriate indications for PPIs

Short-Term Treatment	Long-Term Treatment
<ul style="list-style-type: none"> ● GERD ● Gastric and duodenal ulcers ● H. pylori co-therapy 	<ul style="list-style-type: none"> ● Refractory GERD ● Erosive esophagitis ● Barrett's esophagus ● History of NSAID induced bleeding ulcers ● Chronic anticoagulation after a GI bleed ● NSAID or dual anti-platelet agent use*

*presence of multiple risk factors: Age>65 years, high dose NSAID therapy, PUD, concurrent corticosteroids or anticoagulants

Treatment Recommendations for GERD

- Initial eight-week course of therapy
 - Try to lower dose, as needed therapy, or intermittent therapy
- Refractory GERD—No response to PPI therapy after two to three months (needs GI consult and endoscopy)
 - Add a bedtime H2 blocker if nocturnal symptoms
 - Double the dose

Concerns with Chronic PPI Therapy

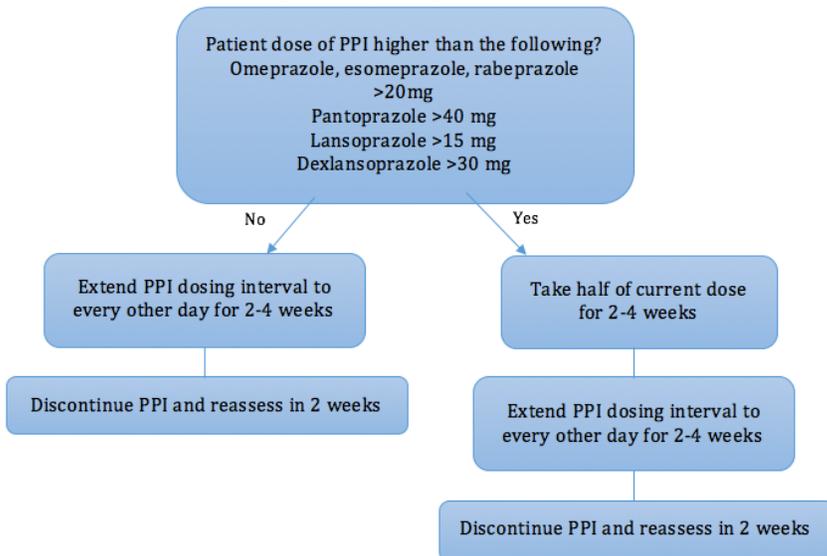
- Clostridium difficile infections
- Hypomagnesaemia
- Increased fracture risk
- Acute interstitial nephritis (rare, idiopathic)
- Chronic kidney disease (weak observational data may be associated with dose and duration)

When PPIs Should Be Tapered and Not Abruptly Discontinued

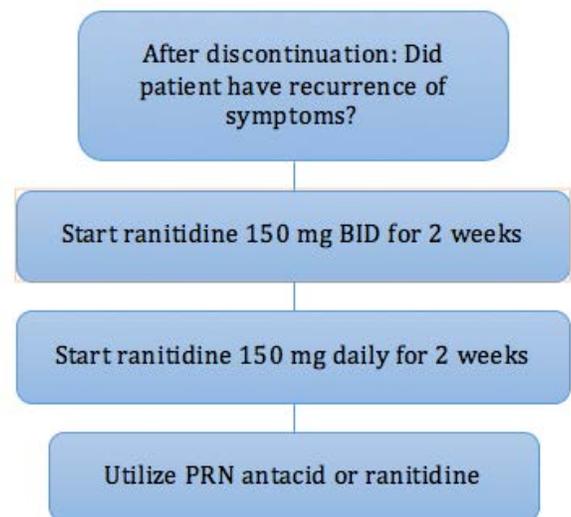
- Patients who do not have any appropriate indications for continuing a PPI, but have been on a PPI for > six months, and asymptomatic at least 3 months
- Counsel patient on initial worsening of symptoms during tapering phase

PPI Tapering Algorithm

Step 1: Tapering Schedule



Step 2: Management of Recurrence



H₂ Antagonist and antacids may be added while tapering for breakthrough symptoms

MEDICINE of THE HIGHEST ORDER



How to Safely Stop Taking Proton Pump Inhibitors

What you need to know

What are PPIs?

Proton pump inhibitors (PPIs) are medications used to reduce the amount of acid in your stomach. They are most commonly used to treat heartburn. Examples of PPIs include:

- Prilosec, Zegerid (omeprazole)
- Nexium (esomeprazole)
- Protonix (pantoprazole)
- Prevacid (lansoprazole)
- Dexilant (dexlansoprazole)
- Aciphex (rabeprazole)

Why should I stop my PPI?

Many patients who are taking PPIs for heartburn can control symptoms with small changes to their diet or by using other medications called antacids (i.e. Tums) or H2-receptor blockers (i.e. ranitidine or Zantac) as needed. This may allow you to take fewer pills each day.

Some long-term risks of ongoing use of PPIs are increased risk of infection, and reduced kidney function. Before stopping your PPI, you should talk to your doctor.

I tried to stop my PPI before but my symptoms came back.

If you have been on a PPI for a long time, your body is used to working with one. If you stop a PPI without weaning down, your body may over-react and produce more acid which causes increased symptoms. See the next section, "How to Stop Your PPI".

How to Stop Your PPI

After discussing with your medical team and deciding to wean off the medication you can do the following:

- If you are taking a PPI once daily: start taking one pill every other day, continue for 2 weeks and then stop. If you are on a higher dose, your doctor may start by prescribing a lower one. In this case, take the lower dose once daily for 2 weeks, then every other day for 2 weeks, then stop.
- If you are taking a PPI twice daily: start taking one pill daily 2 weeks, then take one pill every other day for 2 weeks then stop.

Tips for Success

- Symptoms may come back while your body gets used to working without a PPI. These should get better within a few days to weeks. If they develop, wait until they get better before reducing your dose further.
- Use antacids like Tums (or generic) for fast relief. These will work in about 10 minutes.
- Try an H2 blocker like Zantac (ranitidine). These will work in about 1 hour and can be used with antacids.
- Avoid foods that make your symptoms worse (i.e. spicy, fatty, or acidic foods).

When to call my doctor?

- If symptoms appear to be getting worse at any point while you are stopping the medication.
- If after stopping your PPI for 4 weeks you are having symptoms 2 or more times per week.

