PPI Long-term therapy Primary care best practices

Beyond 12 months is long-term PPI therapy

Help reduce overuse or inappropriate use of medications

PPI therapy is indicated when

GERD
with or without endoscopic esophagitis

Start therapy if symptoms are **moderate to severe:**
- ≥ 2 days a week

Dyspepsia
with or without burning sensation

Ulcer-like
epigastric pain/discomfort dominant

Reflux-like
heartburn and/or regurgitation

Note
PPIs do not work in dysmotility-like dyspepsia (upper abdominal bloating dominant)

Gastric or Duodenal ulcers

Evaluate possible causes:
- H. pylori,
- NSAID use,
- use of anti-platelet agents

All gastric ulcers and duodenal ulcers **need PPI therapy**

Need for long term therapy depends on the cause

Helicobacter Pylori
(H. Pylori)

Confirm diagnosis
- **Stop** PPI therapy 3 days before the test to avoid false negative result.

  Preferably, stop for 2 weeks if the patient can tolerate symptoms
- Use antiacid instead of PPI, prior to the test.

See H. Pylori link in Resources

NSAID prophylaxis

If 1 or more of the following risk factors:
- **Age** > 65 years
- **History of ulcers** or significant dyspepsia
- Concurrent use of **glucocorticoids**
- **Anticoagulants** or concurrent use of anti-platelet agents
- Consider **PPI** if NSAID is added to ASA and patient has significant co-morbidities

If indication for PPI therapy is unknown

1. Investigate why the patient is on a PPI

PPI shared decision making tool

2. Deprescribe PPI if no indication was identified

Talk with your patient about…

Rebound hypersecretion of acid may occur after stopping the PPI for 1 to 2 weeks.

This can result in temporary reflux & dyspepsia symptoms.

Healthy changes like stopping smoking and eating healthy may help as they are important risk factors for GERD, dyspepsia and ulcers.

Patient Education - Managing Acid Reflux

To prevent recurrence *use the lowest frequency of dosing*.

Dosing & Length treatment

Start once daily PPI for 4-8 weeks (30 minutes before breakfast), then reevaluate

Stop therapy if good response after 8 weeks

Retreat if symptoms recur

Consider "on demand" therapy for recurrent symptoms

Try twice daily PPI for 4-8 weeks if partial or no response

Most GERD patients only require once daily PPI for adequate symptom control.

25 % of GERD patients may need to increase their PPI dose, from once daily to twice daily to reduce symptoms. However, **a proportion of GERD patients will not need long-term PPI therapy**

H. pylori-negative non-NSAID ulcers require long term PPI therapy

Upper GI / bleeding ulcer needs PPI twice daily for 8-16 weeks. Then decrease to **once daily**

Give twice daily PPI for two weeks together with antibiotics

Subsequent need for **once daily PPI** therapy depends on symptoms + indications

Start once daily PPI when initiating NSAID

Resources

For healthcare providers

eReferral ADVICE REQUEST

Specialist *LINK* Connecting Doctors, Supporting Patients to ask a specialist a question. *Calgary zone only*

Pathways

GERD Primary Care | **Dyspepsia Primary Care** | **H. Pylori Primary Care**

For patients and healthcare providers

PPI poster to hang in clinic or pharmacy

PPI shared decision making tool

Referral to a GI

Reevaluate the diagnosis, if no response after 8–16 weeks, **consider referral** to a gastroenterologist when:
- age >60 with new and persistent symptoms (>3 months)
- persistent vomiting (not associated with cannabis use)
- gastrointestinal bleeding (hematemesis or melena)
- anemia (iron deficiency or low Hb)
- involuntary weight loss (≥ 5-10% of body weight over 6 months)
- progressive dysphagia
- personal history of peptic ulcer disease
- first degree relative with history of esophageal or gastric cancer

For gastric ulcers **an endoscopic evaluation** is necessary to rule out gastric cancer

Yes if three H. Pylori treatment regimens fail.

Refer to H. Pylori clinical pathway for treatment regimens (yellow box on the right).

No

Choosing Wisely Canada recommends reducing / stopping PPI therapy at least once per year in most patients

Alberta Health Services

Physician Learning Program