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Is Long-Term Use of Proton Pump Inhibitors Justified?

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Introduction

Many patients are using proton pump inhibitors (PPI) for the treatment of acid-related diseases. The long-term treatment with PPI may be associated with several adverse effects and may affect the absorption of some medications.

Objective

The aim of this study is to assess the justification for long-term use of PPI in outpatient clinics in Prince Sultan Medical Military City (PSMMC) in Riyadh. It also included the assessment and detection of adverse effects during long-term PPI administration.

Methods

A retrospective cross-sectional study using medical records data at PSMMC for the evaluation of long-term use of PPI and to investigate any adverse effects associated with long-term administration of PPI.

Results

In this study, 700 patients were screened, out of which 81 patients were fit for our study criteria. 54% of the patients were females. The mean age was 57.3 years and the mean duration of PPI use was 4.8 years (2 to 14.2 years). 70.4% of the patients were using Esomeprazole and 26.6% were using Pantoprazole. The indications included gastro-esophageal reflux disease (GERD) in 48.2%, prevention of NSAIDs induced ulcer in 17.3%, no clear indication in 17.3%, gastritis in 6.1%, *H. pylori* in 2.5% and other indications in 8.6% (Barrett's esophagus, treatment of NSAIDs induced ulcer, patients on corticosteroid or antithrombotic treatment). The adverse effects of PPI use included hypomagnesaemia in 25.7%, hypocalcemia in 7.9%, anemia in 41.3%, low iron level in 16%, osteoporosis in 9.9% and CAP in 14.8% with no *Clostridium difficile* infection found.

Conclusion

Many patients have been taking PPI for long durations with unjustified indications, subsequently exposing the patients for the development of unnecessary adverse effects.

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