

Many patients keep using PPIs after negative GERD test

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Nearly half of patients continue to use proton pump inhibitors (PPIs) even after pH studies confirm that they do not have gastroesophageal reflux disease, and most do not recall being instructed to stop taking PPIs, according to a study published in the June issue of *Clinical Gastroenterology and Hepatology*.

(HealthDay) -- Nearly half of patients continue to use proton pump inhibitors (PPIs) even after pH studies confirm that they do not have gastroesophageal reflux disease (GERD), and most do not recall being instructed to stop taking PPIs, according to a study published in the June issue of *Clinical Gastroenterology and Hepatology*.

Andrew J. Gawron, M.D., of the Feinberg School of Medicine at Northwestern University in Chicago, and colleagues conducted a retrospective study involving 90 patients who had undergone Bravo pH monitoring or multichannel intraluminal impedance-pH testing without evidence of GERD. Patients were compared by current use of PPIs.

The researchers found that 42.2 percent of patients continued to use



PPIs despite a negative pH study result. Only 18.9 percent of patients remembered being instructed to stop taking PPIs. A chart review revealed documented instructions to stop PPI therapy in 16.7 percent of patients. Although no significant demographic or clinical differences were observed among patients currently taking PPIs or not, patients who continued to take a PPI were more likely to report troublesome symptoms that affected their daily life.

"Our findings suggest that a large proportion of patients with negative results from pH monitoring studies continue PPI therapy despite evidence contradicting the presence of GERD," the authors write. "In addition, most patients did not recall being counseled to stop their PPI, and such counsel was not documented in the majority of patients' medical records."

Two authors disclosed <u>financial ties</u> to the pharmaceutical and medical device industries.

More information: <u>Abstract</u> <u>Full Text (subscription or payment may be required)</u>

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