

Patient Information – Proton Pump Inhibitors for the Treatment of Indigestion

INDIGESTION

Indigestion (dyspepsia) is usually pain or discomfort in the upper abdomen or a burning pain felt behind the breastbone. This burning pain is commonly called heartburn.

PROTON PUMP INHIBITORS (PPIs)

A PPI (e.g. omeprazole, lansoprazole, esomeprazole, pantoprazole, rabeprazole sodium) is a medicine that reduces the amount of acid that your stomach makes. By lowering the acid level, it can help to relieve the symptoms of indigestion.

A PPI may be prescribed by your doctor or bought with advice from a pharmacist.

How can I improve my indigestion symptoms?

- Keep to a healthy weight.
- Avoid food and drink that make your symptoms worse (e.g. spicy or fatty foods, chocolate, coffee, cola drinks, orange juice).
- Eat meals at regular times.
- Avoid large or late meals and avoid bending over or lying flat immediately after eating.
- Avoid medicines that can make symptoms worse, e.g. some painkillers. Ask your doctor or pharmacist which medicines are safe to take.
- If your symptoms are worse at night, try raising the head of the bed by 10–15 cm (4–6 inches) using blocks under the legs of the bed.
- Stop or reduce your alcohol consumption. Do not regularly drink more than 14 units per week. If you do drink as much as this, it is best to spread this evenly across 3 days or more. If you feel that you have a problem with alcohol, talk to a healthcare professional.
- Stop smoking. Discuss ways to quit smoking with your doctor or pharmacist or call “Stop Smoking Wales” free on 0800 085 2219.

Should I take a PPI?

Your doctor will discuss with you whether a PPI might be helpful and how long you should take it for. This will depend on why you are taking it, as PPIs can be used for lots of different conditions.

How long should I take my PPI for?

To start with, you may be given a PPI for 4 weeks. If your symptoms continue then you may be prescribed another 4-week course of treatment.

Many people find that after 4–8 weeks of taking a PPI their symptoms are better; the PPI should then be stopped as you no longer need it.

Why should I stop my PPI?

Taking PPIs for a long time can have unwanted effects, so you should only take PPIs long term where there is a definite need.

Unwanted effects of long-term PPIs could include:

- thinning of the bones (osteoporosis),
- masking of the signs of stomach cancer,
- increased risk of infections (e.g. *Clostridium difficile* and pneumonia).

However, some people with certain conditions, e.g. severe oesophagitis, strictures, Barrett’s oesophagus or Zollinger–Ellison syndrome, need long-term PPI treatment. People taking medicines that can cause peptic ulcers may also need long-term PPI treatment. Your doctor will be able to tell you if you need to take a PPI long term.

How will I stop my PPI?

Some people find that when they stop taking their PPI their symptoms seem worse, especially if they have been taking it for a long time. This is because if you take a PPI for more than a few weeks, your stomach will increase its ability to make acid. This means that for a while after you stop taking your PPI, the acid levels in your stomach may be higher than before you started your treatment. To help with this, you may have your treatment ‘stepped down’ to one of the following options:

1. Stop PPI. You may be advised to stop taking your PPI and use an antacid and/or alginate if you still have symptoms. An antacid neutralises the acid in your stomach, and an alginate prevents acid flowing into your oesophagus (food pipe). If these fail to help, you should return to see your doctor.

2. Take PPI only when needed. You may be advised to take your PPI only when you have symptoms. When the symptoms are relieved (often after a few days) you stop taking the PPI.

3. Reduce PPI dose. If you have taken your PPI for a number of months, particularly if you have been taking a high dose, your doctor may reduce your PPI dose for a few weeks before stopping completely.

What if my symptoms come back?

Your doctor may also prescribe you an antacid and/or alginate. These can help to control your symptoms, if needed, until your acid levels return to normal. Alternatively, your doctor may prescribe a medicine known as an H₂-receptor antagonist, e.g. ranitidine, which works in a similar way to a PPI but with fewer long-term side effects.

If you have symptoms when you stop your PPI, and you have not been offered any other medicine, or you think the medicine you have been given is not working, you should speak to your doctor or pharmacist.

It is common for symptoms to come back again, sometimes after a number of months. If this happens, you should speak to your doctor or pharmacist.

What should I do if I develop problems at any time?

You should see your doctor if your symptoms do not get any better, if they get worse or if you have:

- Vomiting, especially if this contains blood or material that looks like coffee grounds;
- Dark, sticky bowel movements;
- Difficult or painful swallowing;
- Unexplained weight loss;
- Chest pain that gets worse with or after exercise, or that goes into your chin or left shoulder. These may be signs of a heart problem.