

# Choosing Wisely<sup>®</sup>

*An initiative of the ABIM Foundation*



## Treating heartburn and GERD

**H**earthburn is a feeling of burning pain in the pit of your stomach or your lower chest. It comes from acid backing up from your stomach into your throat. You may have seen ads for heartburn drugs, such as Nexium, Prilosec, or Prevacid. These drugs are called PPIs (proton pump inhibitors). They keep the stomach from making too much acid. They have been shown to heal irritation of the tube between the throat and the stomach (the esophagus).

In most cases, you don't need a PPI for heartburn. You can get relief from a less powerful drug. And when you do need a PPI, you should take the lowest dose for as short a time as possible. Here's why:

### **You may not need a PPI.**

More than half of the people who take PPIs probably do not need them. Simple heartburn can be treated with antacids or other drugs, plus diet and lifestyle changes.

You may only have heartburn every now and then—such as after a big, spicy meal. This may be uncomfortable, but it is not serious. You can usually get relief from an antacid, like Rolaids or Tums, or an H<sub>2</sub> blocker, such as Pepcid AC or Zantac.

### **PPIs have risks.**

If you need a PPI, taking a low dose for less than a year is probably safe. PPIs are expensive and have been linked to higher risk of some problems. Talk with your doctor before taking them for longer than two weeks. Be sure you have a good reason to take the PPI, and take it for the shortest time possible.



Some risks of taking a PPI for a year or longer include:

- Higher risk of certain fractures.
- Higher risk of kidney disease, or kidney disease that gets worse.
- A higher risk of heart attack.
- In people age 75 and older, a higher risk of dementia.
- Trouble absorbing calcium and vitamin B12.
- Low levels of magnesium in your blood.
- Pneumonia.
- An infection in the intestines called *Clostridium difficile*.

### **PPIs can change the way other drugs work.**

PPIs interact with some common prescription drugs. For example, some PPIs can reduce the blood-thinning effect of the drug Plavix (generic clopidogrel), according to the US Food and Drug Administration. This can increase the risk of heart attack and even death. If you take Plavix, talk to your doctor about whether you should take a PPI.

### **PPIs cost more.**

Why spend more money on a PPI unless antacids or H2 blockers don't work? Both the prescription and over-the-counter versions of PPIs are usually more expensive than antacids and H2 blockers. If you are worried about cost, talk to your doctor. He or she can help you find the least expensive medicine that will work for you.

### **When should you consider a PPI?**

Talk to your doctor if you have symptoms such as trouble swallowing, weight loss, or chest pain. Call the doctor if you don't get better in about two weeks. The doctor will look for signs of problems such as GERD (gastroesophageal reflux disease).

If you have GERD, you probably need a PPI. Talk to your doctor if:

- You have heartburn at least twice a week for several weeks.
- Food or acid come back up into your throat.
- You take antacid or H2 blockers, and you make changes like the ones described on this page, but your heartburn does not go away.

If your doctor thinks you need a PPI:

- Ask to start with a low dose of generic prescription lansoprazole or omeprazole. You can also get these medicines over the counter.
- If the heartburn gets better after a few weeks, talk to your doctor about gradually lowering your dose.

This report is for you to use when talking with your healthcare provider. It is not a substitute for medical advice and treatment. Use of this report is at your own risk.

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