

<u>J Nielsen¹</u>, C Sørensen¹, M Stawowy², D Bonnerup¹

¹ Hospital Pharmacy Central Denmark Region, Denmark, ² Medical Department Randers Regional HospitaL, Denmarkk

DISCONTINUATION OF PROTON PUMP INHIBITORS DURING HOSPITALISATION: A RANDOMISED CONTROLLED TRIAL





- Too many patients take proton pump inhibitors (PPIs) without indication (1,2).
- There are side effects to long term PPI treatment (3).
- No previous studies have examined whether it is possible to reduce or discontinue treatment during hospitalization and continue it successfully after discharge.

Aim

- The aim of the study is to investigate if PPIs can be discontinued or reduced through counselling by pharmacy staff during hospitalisation.
- In addition, it is investigated whether dose reduction and/or discontinuation affects symptoms, number of readmissions and quality of life.

Materials and methods

Patients at the Emergency and Medical Departments at Randers Regional Hospital, were randomized into 2 groups, intervention and control group.

- 31 adults were included. 4 withdrew from the investigation at their own request or because they could not be reached on follow-up telephone calls.
- Baseline characteristics showed no statistically significant difference between intervention and the control group in terms of age, gender, number of drugs, symptoms, number of readmissions or quality of life.

Tabel 1: Number of adults included in the study and allocation to intervention or control group.

Group	Intervention	Control	Total
No dose reduction or discontinuation	4	13	17
Dose reduction or discontinuation	9	1	10
Total	1 7	1 /	77



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% with dose reduction or discontinuation	69,2 % [38.6-90.9%]	7.1% [0.2-33.9]	

- The proportion of patients who successfully discontinued or reduced their use of PPI was 69.2% (CI95%: 38.6-90.9%) (9 in 13 patients) in the intervention group compared to 7.1% (CI95%:0.2-33.9) (1 in 14 patients) in the control group.
- The difference between groups was statistically significant (p=0.001).

Conclusion

- The primary outcome was the proportion of patients who successfully reduced or discontinued their use of PPIs.
- Statistically significantly more patients discontinued or reduced their use of PPI after counselling by the pharmacy staff.

- Dose reduction and/or discontinuation did not affect sy mptoms, number of readmissions and quality of life.
- The pharmacy staff was capable of identifying patients for whom PPI dose reduction or discontinuation was relevant and performing a successful counselling on discontinuation or reduction of the use of PPIs.

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> For further information contact: Jette Lyngholm Nielsen jettnl@auh.rm.dk Hospital Pharmacy Central Denmark Region

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