

Acid Reflux Disease

Treatment and Potential Cost Savings

What is a PPI?

Proton Pump Inhibitors (PPIs) are drugs that provide safe and rapid relief of heartburn, ulcers, and gastroesophageal reflux disease (GERD). PPIs reduce stomach acid, but are not a cure. They reduce symptoms and heal damaged areas better than any other medication currently available.

There are currently 7 PPIs available: Dexilant[®], Nexium[®], Prevacid[®], Aciphex[®], Prilosec[®], Protonix[®] and esomeprazole strontium. Prilosec (omeprazole), Prevacid (lansoprazole), Protonix (pantoprazole), Aciphex (rabeprazole), Nexium (esomeprazole), and esomeprazole strontium are available generically. Nexium[®] 20mg, Prilosec 20mg and Prevacid 15mg are also available over-the-counter.

Do I need a PPI?

If you rarely have heartburn, belching, and sore throats, then a PPI most likely is NOT for you. If these symptoms happen all the time, it may be a sign of a more severe disease. These include GERD or ulcers. They may require a PPI for treatment. PPIs are also used to prevent ulcers in patients on certain chronic medications. These drugs include those used for pain relief or arthritis. Please ask your doctor to find out if you take these medications.

How long will I need to be on a PPI?

In most cases, you will be on a PPI for at least 8 weeks. You may be able to stop taking the PPI if your symptoms are gone. If your symptoms return, the PPI can be restarted. Certain people will need to take these drugs for the rest of their life.

Is one PPI better than the others?

No. Studies have shown that all PPIs have similar effects at comparable doses. Most people will get relief from *any* PPI. However, experience has demonstrated that a given person may respond better to one PPI than another.

If all PPIs work the same and are safe, is there a difference in cost?

PPIs cost from ~\$5 to over \$250 per month. Prilosec (omeprazole), Prevacid (lansoprazole), Protonix (pantoprazole), Aciphex (rabeprazole), Nexium (esomeprazole), and esomeprazole strontium are available as generics. They cost much less. A generic drug does not mean it is not as good, these generics work just as well as brand drugs. Brand drugs will cost more, like Dexilant. Also, although esomeprazole strontium is a generic, it remains expensive.

What is the most cost effective PPI for me?

Protonix (pantoprazole) is generic and it will cost the least in most cases. Many prescription plans include pantoprazole, lansoprazole, or omeprazole as the PPI of choice. Some insurance carriers prefer other PPIs. Ask your insurance company for their preferred PPI. The preferred PPI is the best bargain for you. If your plan does not include a PPI, Prilosec OTC[®] is available over the counter.

Should I be concerned about switching from one PPI to another?

In general, no. However, each PPI may have different drug interactions. Your doctor and pharmacist will decide which is best for you based on your other medications.

How should I take a PPI to get the most benefit?

PPIs work best if taken 30 to 60 minutes before a meal. Dexilant and Protonix (pantoprazole) can be taken with or without food. If you only take a PPI once a day, it is best to take it before breakfast. In most cases, PPIs must be routinely taken in order to keep stomach acid low. Sometimes, PPIs are taken only as needed. Your doctor will tell you specifically how to take it depending on your condition.

What else can I do to help?

Dietary changes may help reduce your need for PPIs. A few tips to avoid increased acid include eating smaller meals, eating less fatty foods, chocolate, onions, alcohol, mints, and coffee. Other helpful changes include weight loss, stopping smoking, and not eating within 3 hours of bedtime.

References: Consumer's Union. Drugs to Treat Heartburn, Ulcers, and Stomach Acid Reflux: The Proton Pump Inhibitors. Comparing Effectiveness, Safety, and Price. *Consumer Reports Best Buy Drugs*. January, 2007:1-14. DeVault KR and Castell DO. Updated Guidelines for the Diagnosis and Treatment of Gastroesophageal Reflux Disease. *American Journal of Gastroenterology*. 2005;100:190-200.



The services, programs, and/or facilities above are offered to our patients and families as a resource. The list is not all-inclusive and does not constitute a recommendation by GRIPA nor assurance as to the quality of services provided.

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