



NEW MEDICATION RISKS

Proton Pump Inhibitors | Prilosec (Omeprazole), Nexium, Prevacid, Protonix, Aciphex, Zegerid, Dexilant.

Proton pump inhibitors (PPI) can help treat heartburn and esophageal reflux disease by inhibiting the ability of the stomach to produce acid. These medications can be miraculous for reducing the reflux, spasms and ulcer pains associated with acid overproduction and leaking back up into the esophagus.

Most people that take proton pump inhibitors probably do not need them, or only need for a limited time to treat an acute condition. The usual duration is only 2-8 weeks except in certain conditions.

Unfortunately these medications have been linked to some significant medical complications, some as direct effect and some by association:

Magnesium deficiency (increase risk seizures, irregular heart beats, muscle spasms)

Increased risk of infection (Salmonella, Clostridium difficile, a life threatening diarrhea)

Increased risk of pneumonia

Chronic kidney disease and kidney failure

Dementia (44% increased risk with regular use)

Heart disease including heart attacks

Vitamin deficiencies including B12

Nutrient and mineral deficiencies including iron

Bone fractures (Hip, spine, wrist most common)

Failed digestion of foods, since acid assists in digestion.

Headaches and nausea are common side effects.

Interferes with medications including Plavix which is important for certain heart conditions.

Why is it so hard to come off these medications?

Rapid withdrawal of the medication causes a surge in acid production. Now that the acid pumps are no longer inhibited, there is this *rebound* effect where the acid production is tremendous and it can be very uncomfortable. Many interpret this rebound as a need to continue their medication indefinitely. Additional risks arise with these medications are available over the counter. Many people are taking these medications inappropriately and we may not even be aware of their use / risk.

How to safely stop the medication?

If you have a condition like Barretts esophagitis or esophageal cancer, you should not discontinue the medication without the guidance of your gastroenterologist as this could increase cancer risk. Active ulcers or protection from short term stomach damage by medications should continue the medication for brief treatments unless told otherwise.

Heartburn and Reflux are not so much a disease, but a consequence of poor dietary and lifestyle choices. Most people can safely wean themselves off the medication by adopting a healthy diet, avoiding spicy foods, caffeine, fried foods, chocolate, sodas/coffee, and most processed foods. Moderate weight loss will reduce the reflux by allowing the stomach to remain in the abdominal cavity where the valve keeps acid in the stomach. If overweight, the stomach can slide into the chest area through a Hiatal Hernia, where the valve opens and acid will spill up and down the esophagus causing damage to the tissue and can lead to esophageal cancer, but can also be aspirated into the lungs causing asthma like symptoms, chronic cough, ear infections, dental decay and other ill effects. Drinking water helps wash acid down the esophagus through the day, and elevating the head of your bed, not just pillows, can help keep acid in its place.

Ready to quit?

Weaning is best done slowly **while taking over the counter H2-blockers (Pepcid or Zantac) at the same time as the PPI**, and slowly reducing the dose and increasing the interval between doses of the PPI over weeks or even months. Then the H2-blocker is weaned as well. With healthy diet and precautions you should be fine without medications.