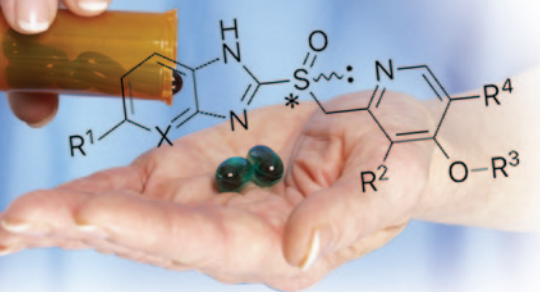


Dangerous Side Effects of PPI Medications



Over past 22 years of practicing pharmacy, I have seen significant increase in prescriptions for anti-acids called Proton pump inhibitors (PPI). PPI are the most potent inhibitors of gastric acid secretion and are one of the top most common medications, second only to anti-cholesterol pills, taken by the general public.

The efficacy and availability as both prescription and non-prescription drugs, which are relatively safe for short term use, can lead to excessive and inappropriate use and causes dangerous side effects that should be brought to the attention of the general public and health care professionals. PPI are generally used in the prevention and treatment of acid related disorders such as gastroesophageal reflux disease (GERD), Peptic ulcer disease, erosive esophagitis, heart burn, and H. Pylori eradication.

Examples of PPI drugs are omeprazole, esomeprazole, pantoprazole, lansoprazole, dexlansoprazole, and rabeprazole. There are several serious potential side effects related to long-term use which include pneumonia, C. difficile diarrhea, risk of bone fractures, tooth decay, decreased absorption of magnesium, iron, B12, calcium, among others, which can lead to other problems.

It is possible to come off these medications by consulting your physician and putting in practice some of my suggestions. First of all, our GI tract is one of the largest organs in the body -- its surface area can expand to the size of a tennis court. We eat around 30 to 40

tons of food in an average lifetime. Also, our gut contains 100 trillion bacteria -- 400 different species.

When we ingest a substance that is harmful, it can cause a problem to our gut -- and we can then get sick. When we take PPI for long time, our body upregulates acid production to compensate for decrease of acid production. As a result, we will get rebound symptoms -- which makes it difficult to stop PPI.

Please consult with your physician before tapering with your PPI. I would like to recommend the following suggestions to successfully do so:

- 1) Taper slowly by decreasing by 50% each week until lowest dose possible
- 2) PPI can be changed to H2 blockers such as Ranitidine in few weeks
- 3) If possible stop H2 blockers after a few weeks
- 4) Stop or decrease intake of spicy foods, fatty foods, alcohol, caffeine and dairy. Consider an elimination diet
- 5) Weight loss and avoid tight fitting clothes
- 6) Smaller and less fluid intake with meals. Also slowing down and chewing your meals well
- 7) No meals 4-5 hours before bed. Use of 4-6" blocks helps. Do not prop up on pillows which can cause intra-abdominal pressure
- 8) Stop smoking
- 9) Decrease stress
- 10) Regular aerobic activity -- but not right after meals
- 11) Take probiotics which can break down your food better. Eat Kefir and fermented vegetables.
- 12) Drink more water
- 13) Eat more vegetarian food and decrease red meat intake

Please consult your physician and pharmacist for further help.



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