

# Unnecessary Proton Pump Inhibitor Usage Reduction after Bacterial Treatment

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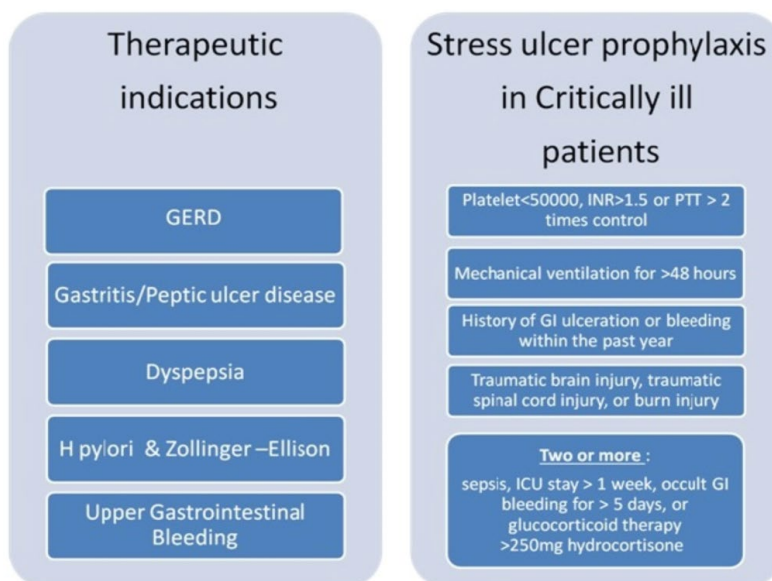


Figure 1. Therapeutic indications during *H. pylori* treatment.

*H. pylori* (*Helicobacter pylori*) are a type of bacteria that infects your stomach and leads to gastritis and gastric ulcers due to inflammation in the duodenum and upper digestive tract. After diagnosis treatment involves proton pump inhibitor (PPI) use with a 10-14 day course of antibiotics. After treatment, resolution of symptoms, and confirmed eradication of *H. Pylori* the use of proton pump inhibitors is generally not recommended unless certain criteria are made. Almost half of all African Americans have the bacteria. For people who come to the U.S. from developing countries, at least 50% of Latinos and 50% of people from Eastern Europe have *H. pylori*. Our urban primary care practice in urban Jersey City NJ has a high rate of gastritis from *H. pylori*. Due to our high risk population we thought it was an opportunity for quality improvement for better evidence based patient care.

Reduce PPI therapy to decrease cost to our patients, mitigate poor bone health, hypocalcemia, hypomagnesemia, Clostridium difficile infections, and pneumonia that are associated with proton pump inhibitor use [1].

Using our electronic medical record Lytic MD we found twenty-eight patients from January 2021-July 28<sup>th</sup> 2022 time period who were treated with confirmed *H. pylori* with triple or quadruple therapy. Those who were treated

were then screened for the following indications for continued to treatment which included diagnosis codes for gastroesophageal reflux disease, gastritis, peptic ulcer disease, dyspepsia, persistent *H pylori*, Zollinger-Ellison syndrome, and upper GI bleeding. We found that seven patients were still on PPI therapy, 4 of which with one of the above indications, and 3 without the above indications.

There is a chance that more patients than reported in the study could be potentially on PPI therapy now which may not be recorded in the EMR. We found that many patients over use PPI therapy after treatment with *H. pylori* mostly due to poor education and background knowledge. In effort to prevent over use in the future we will be using the following sheet in follow up appointments in order to screen earlier for all patients on PPI therapy to prevent over use.

## References

1. Hastrup, Peter Fentz, Wade Thompson, Jens Søndergaard and Dorte Ejg Jarbøl. "Side effects of long-term proton pump inhibitor use: A review." *Basic Clin Pharmacol Toxicol* 123 (2018): 114-121.

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