August 2012

GERD

1. Q: What are the classes of GERD?

A: 1. Trivial to mild 2.Moderate to severe 3. Severe

1. Q: How do you treat trivial to mild GERD?

A: 1. Antacids 2. Alginates 3. H 2 Receptor Antagonists

1. Q: What medications are used to treat moderate to severe GERD?

A: 1. Proton Pump Inhibitors: PPI 2. H 2 Receptor Antagonists

1. Q: What PPI medications are used for treating GERD?

A: 1. Dexlansoprazole 2. Esomeprazole 3. Lansoprazole 4. Omeprazole

5. Pantoprazole magnesium 6.Pantoprazole sodium 7. Rabeprazole

1. Q: How are PPIs dosed?

A: ½ hour before meals, QD or BID, rarely PRN.

1. Q: What typically happens after a PPI medication is withdrawn?

A: Acid rebound

1. Q: What H 2 Receptor Antagonists are used to treat GERD?

A: 1. Cimetidine

2. Famotidine

3. Nizatidine

4. Ranitidine

1. Q: How effective are H 2 Receptor Antagonist medications?

A: Twice a day doses relieve symptoms in 60% of patients with moderate to severe GERD and heal histologically mild esophagitis in over 40% of patients

1. Q: How effective are PPIs for GERD?

A: 80 to 90 % effective

1. Q: What is the typical rebound rate for withdrawal of GERD medications?

A: 80%

1. Q: What percentage of patients on GERD medications experience nocturnal acid

break through?

A: 70%

1. Q: How long should I treat with my initial treatment regime?

A: 4 to 8 weeks

1. Q: What drug should be added or substituted if initial therapy fails?

A: Metoclopramide

1. Q: What is the mode of action of Metoclopramide?

A: 1. Blocks Dopamine and Serotonin receptors.

2. Increases lower esophageal sphincter tone.