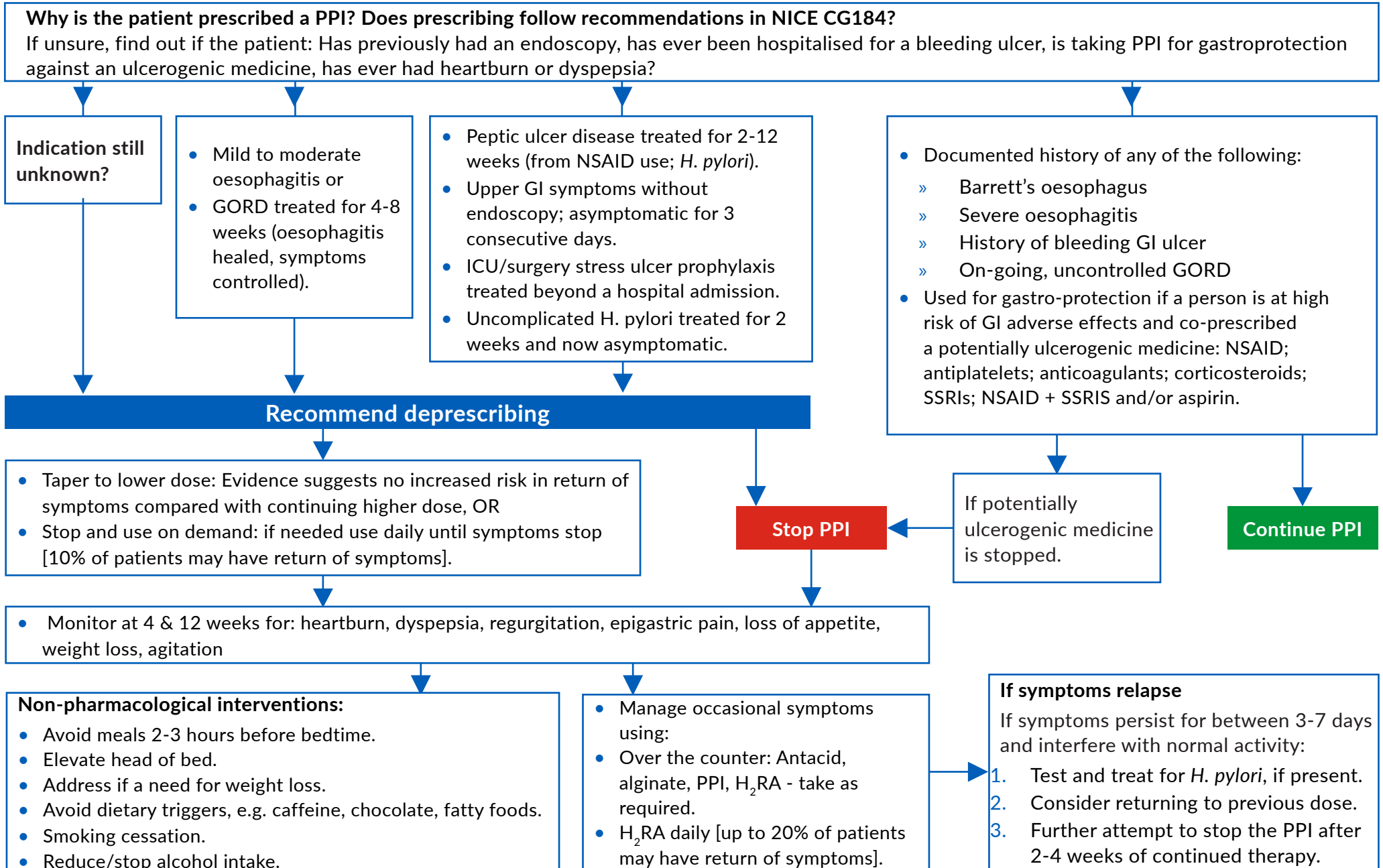


Attachment 5: Proton Pump Inhibitor (PPI): Deprescribing algorithm (adults)



General principles of deprescribing

- Treat the patient as an individual, use shared decision-making – patients and/or care givers are more likely to engage if they understand the rationale for deprescribing at initiation of a new medicine.
- Taper doses, unless a severe adverse drug event (ADE or side effect) is experienced.
- Patients with multimorbidity who are treated according to guidelines are prescribed a large number of medicines. This polypharmacy increases the risk of an ADE. Stopping medication may relieve these effects, and thereby improve the patient's wellbeing.

Specific therapeutic information

- A short course of a PPI with review and stopping criteria is appropriate for some indications.
- Risks of PPIs if used long-term: increased fractures; *C difficile* infections; diarrhoea; community acquired pneumonia; vitamin B₁₂ deficiency; hypomagnesaemia; dementia; acute interstitial nephritis and chronic kidney disease.
- The risk of side effects may outweigh the benefits when an on-going indication is unclear.
- Efficacy of PPIs in patients without erosions is lower than in those with established erosions.
- Tapering doses: There is no evidence one approach is best, but gradual step down reduces the risk of rebound hyperacidity and the need to reinstate. Advise patients there may be an increase in symptoms for a few days.
- Offer lifestyle advice along with reducing the frequency and dose or stopping the PPI and advise use on demand. Use shared decision-making to understand what is convenient and acceptable to the patient.

PPI (formulation if appropriate)	Standard dose (healing) (once daily)*	Low dose (maintenance) (once daily)
Omeprazole (as capsules)	20mg ⁺	10mg ⁺
Lansoprazole (as capsules)	30mg ⁺	15mg ⁺
Pantoprazole	40mg	20mg
Rabeprazole	20mg	10mg
Esomeprazole	20mg ^a or 40mg ^b	20mg

Posology and method of administration can be found in the individual Summary of Product Characteristics (SPC).

* Standard dose PPI taken BD only indicated in treatment of peptic ulcer caused by *H. pylori*; PPI should generally be stopped once eradication therapy is complete unless risk factors warrant continuing PPI.

⁺ Can be sprinkled on food

^a Non-erosive reflux disease

^b Reflux oesophagitis

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