Proton pump inhibitors (PPIs) are medications such as omeprazole, pantoprazole, or esomeprazole, that are typically prescribed for heartburn and acid reflux. They reduce the amount of acid in the stomach.

Residents with significant heartburn, stomach ulcers, or changes in their esophagus as a result of chronic heartburn benefit from these medications. However, most residents with heartburn do not need to take the medication forever.

In the short term, PPIs are helpful to manage symptoms of heartburn but over time, side effects can develop. PPIs increase the risk for certain infections including bowel infections (c. diff, salmonella, and campylobacter) and pneumonia. They also increase risk of vitamin deficiencies (B12, magnesium, and iron), and can increase the risk for hip fracture due to weakening in the bones. Some of the PPIs can also interfere with absorption of other medications such as clopidogrel, iron, and warfarin.

Yes! If a resident no longer has heartburn or if their heartburn symptoms have improved, they may no longer need daily medication or may be able to take medication only when they have symptoms. Many residents also benefit from avoiding certain foods that aggravate their heartburn such as caffeine, acidic, or spicy foods. They may also benefit from lifestyle modifications, such as avoiding eating within 2 hours of lying down. Some “as needed” medications that are effective for symptoms include calcium carbonate or aluminum hydroxide/magnesium hydroxide.

Monitor them for symptoms and encourage lifestyle modifications as above. Inquire about heartburn and stomach pains when you are assessing your resident.