

Choosing Wisely[®]

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Treating heartburn and GERD

Using Nexium, Prilosec, and other PPIs carefully

Hearthburn is a feeling of burning pain in your lower chest, behind the breastbone. It comes from acid backing up from your stomach to your throat. You may have seen ads for heartburn drugs, such as Nexium, Prilosec or Prevacid. These drugs are called PPIs (proton pump inhibitors). They keep the stomach from making too much acid.

In most cases, you don't need a PPI for heartburn. You can get relief from a less powerful drug. And when you do need a PPI, you should take the lowest dose for as short a time as possible. Here's why:

Do you need a PPI?

PPIs are powerful drugs. Studies suggest that more than half of the people who take PPIs probably do not need them. Simple heartburn can be relieved with antacids or other less powerful drugs.

- Do you have heartburn every now and then—after a big, spicy meal, for example? This kind of heartburn is uncomfortable, but it is not serious. You don't need a PPI. You can usually get relief from an antacid, like Roloids or Tums, or an H₂ blocker, such as Pepcid AC or Zantac.
- Have you had heartburn more than twice a week for several weeks? Then you may have GERD (gastroesophageal reflux disease). This is when acid made in the stomach backs up into your throat. Over time, it damages the lining of your esophagus (the tube from your throat to your stomach). If your doctor thinks you have GERD, you may need a PPI.



PPIs have risks.

If you need a PPI, taking a low dose for less than a year is probably safe. But taking a PPI for a year or longer has been linked to:

- A higher risk of breaking a hip.
- Low levels of the mineral magnesium in your blood. This can cause shaking, muscle cramps, and irregular heartbeats.
- Pneumonia.
- An intestinal infection called *Clostridium difficile*, which can lead to severe diarrhea, fever, and, in rare cases, death.

Ease heartburn without drugs

Many people who have heartburn don't need drugs at all. They can feel better by making changes in their diet and lifestyle. Try these things before you try drugs:

Watch what you eat.

Try to figure out which foods and beverages give you heartburn. Then try to avoid them. Foods and drinks that may cause heartburn include:

- Alcohol
- Fried foods
- Spicy foods
- Garlic and onions
- Oranges and other citrus fruits
- Chocolate and peppermint
- Coffee and other drinks with caffeine, such as Coke
- Foods with a lot of tomatoes, such as pizza, salsa, and red pasta sauce



Eat smaller meals and do not go to bed right after you eat. Do not overload your stomach. And avoid lying down for two hours after you eat.

Stop smoking. If you need a reason to stop smoking, heartburn may be it. Research shows that smoking raises your risk for heartburn and GERD.

Lose extra weight. It has been proven that losing just a few extra pounds can help lessen the effects of heartburn and GERD.

Loosen up. Don't wear tight clothes or tight belts that press on your middle. The extra pressure can make heartburn worse.

Sleep with your head raised. Raise your upper body with pillows. Or raise the head of your bed about six to eight inches. Try putting wooden blocks under the top legs of the bed.

PPIs can change the way other drugs work.

PPIs interact with some common prescription drugs. For example, some PPIs can reduce the blood-thinning effect of the drug Plavix (generic clopidogrel). This can increase the risk of heart attack and even death.

PPIs cost more.

Why spend more money on a PPI unless antacids or H2 blockers don't work?

- A prescription PPI costs \$100 to \$300 more each month than an antacid or an H2 blocker.
- An over-the-counter PPI also costs more than an antacid or an H2 blocker. You can buy Prilosec (generic omeprazole) without a prescription. But you would still pay \$10 more a month for a PPI like this than for an antacid or H2 blocker.

When should you consider a PPI?

If you have GERD, you probably need a PPI. Talk to your doctor if:

- You have heartburn at least twice a week for several weeks.
- Food often comes back up into your throat.
- Your heartburn does not go away after you make the diet and lifestyle changes listed in the blue section and you take antacids or H2 blockers.

If your doctor thinks you need a PPI:

- Ask to start with a low dose of generic omeprazole or over-the-counter Prilosec (20 mg) or Prevacid 24HR (15 mg).
- If the heartburn gets better after a few weeks, try to slowly stop using the PPI. Slowly lower your dose. Try taking it every other day. On the days you don't take the PPI, take an antacid instead.

This report is for you to use when talking with your health-care provider. It is not a substitute for medical advice and treatment. Use of this report is at your own risk.

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