

Introduction

- In March 2018, Canadian physicians in the province of NL received notification of new Choosing Wisely Canada guidelines encouraging PPI discontinuation in most patients with GERD.¹
- An adverse event from PPI discontinuation may be esophageal stricture.
- This retrospective chart review aimed to assess the proportion of patients with esophageal strictures who had previously discontinued their PPI medication before and after implementation of these new guidelines.

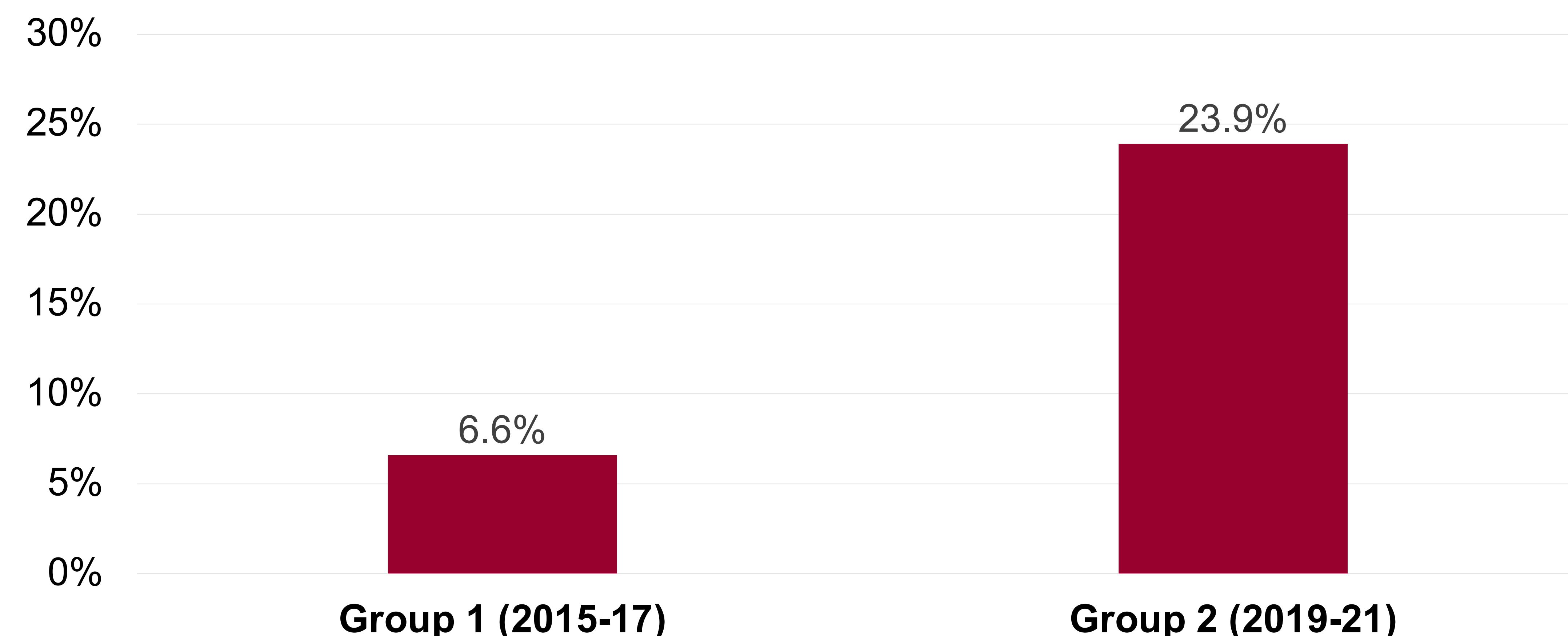
Methods

- Research participants were identified using billing codes for esophageal dilations from two full time gastroenterologists for the years 2015-17 and 2019-21.
- We analyzed endoscopy reports, nursing records, and medication forms in the electronic record system (Meditech).
- PPI discontinuation was defined as either a 50% dose reduction, 50% frequency reduction, or complete medication discontinuation at the time of dilation compared to the previous established PPI therapy.
- We identified 246 esophageal dilations between the years of 2015-17 and 2019-21.
- In total, 23 dilations were excluded because of incomplete medical records, leaving 223 dilations to be analyzed.

Results

- Patients receiving dilations from group 1 (2015-17) had a PPI discontinuation rate of **6.6%** (10/152 cases). Meanwhile, patients from group 2 (2019-21) had a PPI discontinuation rate of **23.9%** (17/71 cases). These results were statistically significant ($P < 0.001$) following Chi-Squared analysis.
- Demographic composition of groups 1 and 2 were similar with no significant differences in age (59.2, 57.7), male sex (60%, 53%), and percentage of patients with GERD (52%, 66%).

PPI Discontinuation Rates



Conclusion

- This study indicates that patients who had esophageal dilation between 2019-2021 were more likely to have discontinued PPI therapy compared to those undergoing dilation from 2015-2017.
- These results suggest PPI discontinuation may be deleterious for some patients. Further research at other centers using larger patient cohorts should be conducted to replicate our findings.