

## PEARLS Practical Evidence About Real Life Situations

## Proton pump inhibitors (PPPIs) most effective treatment for oesophagitis

Clinical question	What is the most effective treatment for reflux oesophagitis?
Bottom line	Proton pump inhibitor (PPI) therapy is the most effective treatment for short-term (8wks) management of gastro-oesophageal reflux disease (GORD) - NNT= 1 to 2 (for PPI vs placebo). PPI better than H2 receptor antagonist (H2RA) but both superior to placebo. There is a paucity of evidence on prokinectic therapy but no evidence that it is superior to placebo.
Caveat	In equivalent dosage different PPI preparations do not show statistically significant differences in their healing effects. Although there was an apparently higher disease persistence rate at the end of the treatment with double dose PPI compared to standard dose, this difference was not statistically significant.
Context	GORD is a common problem with an estimated prevalence of 20% in adults. PPIs and H2RAs relieve symptoms by reducing acid secretion in the stomach.
Cochrane Systematic Review	Mostafizur Khan, Jose Santana, Clare Donnellan, Cathryn Preston, Paul Moayyedi. Medical treatments in the short term management of reflux oesophagitis. Cochrane Database of Systematic Reviews 2007, Issue 2. Art. No.: CD003244. DOI: 10.1002/14651858.CD003244.pub2. This review contains 134 trials with 35978 participants. Cochrane Reviews 2007, Issue 1.
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PEARLS are succinct summaries of Cochrane Systematic Reviews for primary care practitioners. They are funded by the New Zealand Guidelines Group.

PEARLS provide guidance on whether a treatment is effective or ineffective. PEARLS are prepared as an educational resource and do not replace clinician judgement in the management of individual cases.