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Acid-suppressive medications and infections: Pro and contra

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This review summarizes the benefits, risks and appropriate use of acid-suppressing drugs (ASDs), proton pump inhibitors (PPIs) and histamine-2 receptor antagonists (H2RAs), particularly in the elderly, advocating a rationale balanced and individualized approach aimed to minimize any serious adverse consequences. It focuses on current controversies on the potential of ASDs to contribute to infections - bacterial, parasitic, fungal, protozoan and viral, comprehensively and critically discusses the growing body of observational literature linking ASD use to a variety of enteric, respiratory, skin and systemic infectious diseases and complications (*Clostridium difficile* diarrhoea, pneumonia, spontaneous bacterial peritonitis, septicemia and other). The pathogenic mechanisms of ASD-associated infections (related and unrelated to the inhibition of gastric acid secretion, alterations of the gut microbiome and immunity), agent-specific side effects and drug-drug interactions are also described. However, accumulating data on the complexity of ASD effects involving important defense systems and resulting in dysbiosis and increased risk for infections, particularly in the elderly, should not invalidate their use as long as it is evidence based. Both probiotics use and correcting vitamin D status may have a significant protective effect decreasing the incidence of ASD-associated infections. The importance of individualized therapy and caution in ASD use considering the possible spectrum of adverse events, the balance of benefits and potential harms, factors that may predispose to and actions that may prevent/attenuate adverse effects is evident. A six step practical algorithm for ASD therapy based on the best available evidence is recommended.

Biography

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