Treatment Falling Short for Many GERD Patients

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Montreal — Gastroesophageal reflux (GERD) symptoms are poorly controlled across North America and Europe, and people with nocturnal symptoms represent the largest treatment gap, according to two different industry-sponsored studies presented in a series of posters at the 12th World Congress of Gastroenterology.

“There’s a huge unmet prescribing need,” said Farah Husein-Bhabha, from Janssen-Ortho Inc. in Toronto, which sponsored one of the studies. “We found that the use of over-the-counter drugs is much higher than prescription drug use and yet these patients continue to experience symptoms,” she told FAMILY PRACTICE NEWS.

The Canadian study randomly polled 2,011 people in Ontario by telephone to assess the prevalence and impact of gastroesophageal reflux disease (GERD) in the general population. Just over 40% of the respondents (820) reported at least one upper gastrointestinal symptom in the last month, with the most common complaint being GERD (367). Among GERD sufferers, 54% had sought medical help for their problem, while 46% had not.

The U.S./European study (sponsored by AstraZeneca), which randomly polled 212,000 households in the U.S. and Europe, identified 1,908 respondents who were either formally diagnosed (52%) or undiagnosed but with symptoms suggestive of GERD (48%). Among these, 64% reported nocturnal symptoms, compared with 50% in the Canadian study.

Both studies identified a high percentage of patients who reported nocturnal GERD symptoms either alone, or together with daytime symptoms. In the Canadian study, 47% of those with nocturnal GERD symptoms reported disturbed sleep, and 43% of these people reported a negative impact on their daytime functioning and productivity as a result.

The U.S./European study found that, when woken up with GERD symptoms, people stayed awake an average of 70 minutes and missed an average of 30 minutes of work per week as a result. This compared with only 6 minutes of lost work time per week in GERD patients without disturbed sleep. GERD-related sleep disturbance was estimated to be responsible for a 15% reduction in productivity and a 14% reduction in leisure time, compared with an 8% and 10% reduction in GERD patients without disturbed sleep.

Nocturnal GERD symptoms are of particular concern not only for quality of life reasons, but also because of their long-term implications, said Ms. Husein-Bhabha. “If a patient has nocturnal symptoms, it generally means a more severe type of GERD, and there may also be an association with more erosive disease. There is a certain percentage of the population that may progress to esophageal cancer if they are untreated. But for many patients who do not have erosive disease that risk is small and probably less than we had originally thought.”

Both studies found that GERD symptoms are undertreated.

In the Canadian population, 57% of GERD sufferers were taking over-the-counter (OTC) medications, while 25% used prescription medications. In the U.S./European study, 74% of the diagnosed group were taking prescription medications (55% of which were proton pump inhibitors), while 85% of the undiagnosed group were taking OTC medications.

Despite some improvement resulting from these treatments, the majority of patients in the U.S./European study reported unresolved symptoms (81% of the self-treated group and 68% of those taking prescription medications).

In the Canadian study, only 54% of patients using proton pump inhibitors (PPIs) for nocturnal relief felt satisfied with the treatment. “Our findings imply the use of medication for management of GERD can be improved,” concluded the authors of the U.S./European study. “Symptoms were more likely to improve when GERD was formally diagnosed by a physician and PPIs prescribed… Individuals with persistent GERD symptoms should consult a physician.”

The Canadian study found that the strongest predictor of a person seeking GERD treatment from a physician was nocturnal GERD symptoms. Other predictors included older age, more severe symptoms, and longer duration of symptoms.