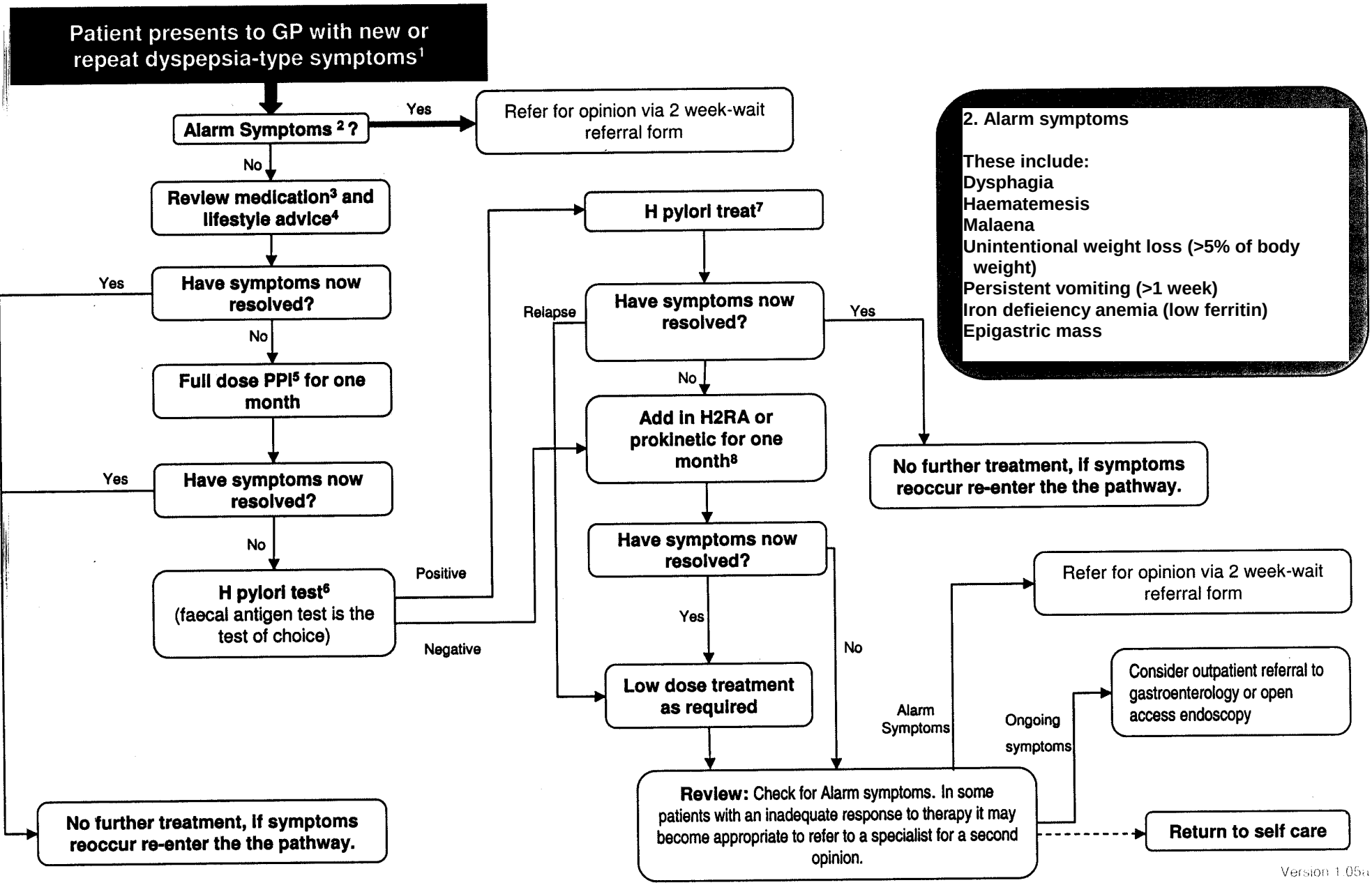
Salford Dyspepsia Integrated Pathway

Salford Primary Care Trust and Salford Royal NHS Foundation Trust



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Salford Dyspepsia Integrated Pathway - Notes

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1. Dyspepsia

Dyspepsia can be defined broadly to include patients with recurrent epigastric pain or discomfort, heartburn or acid regurgitation, with or without bloating, nausea or vomiting. For patients who have had an endoscopic diagnosis please refer to the relevant NICE guidance and pathway.

2. Alarm Symptoms

Alarm symptoms include:

- ➔Dysphagia
- ➔Haematemesis
- ➔Malaena
- ➔Unintentional weight loss (>5% body weight)
- ➔Persistent vomiting (> 1 week)
- ➔Iron deficiency anaemia (low ferritin)
- ➔Epigastric mass

3. Review Medications

Review medications for possible causes of dyspepsia, for example, calcium antagonists, nitrates, theophyllines, bisphosphonates, steroids and NSAIDs.

4. Lifestyle Advice

Offer simple lifestyle advice, including advice on healthy eating, weight reduction and smoking cessation.
Advise patients to avoid known precipitants they associate with their dyspepsia where possible. These include smoking, alcohol, coffee, chocolate, fatty foods and being overweight.
Raising the head of the bed and having a main meal well before going to bed may help some people.

5. PPI Advice

Omeprazole 20 or 40 mg (2 x 20mg) as capsules or Lansoprazole 30mg capsules are the recommended treatment PPIs for **new** patients
Patients should have their treatment regularly reviewed and stepped down or stopped as appropriate
It should be remembered that some PPIs do have interactions e.g. warfarin (intermittent use may cause problems with INR control).
N.B. If a PPI is initiated by a physician in secondary care, other than a gastroenterologist, review the need/benefit after a 4-week trial period.

If the patient has already been through the pathway within the past 6 months and has not been tested for H. Pylori – this should be the first step of the pathway if symptoms recur.

6. H.pylori Test

Faecal antigen testing is the investigation of choice. A 2-week washout period following PPI use is necessary before testing for H. pylori.

7. H.pylori Treatment

Treatment
1st line: Lansoprazole 30mg caps bd, Amoxicillin 1g bd, Clarithromycin 500mg bd in combination for 1 week
Penicillin-sensitive patients: substitute Metronidazole 400mg bd for Amoxicillin

8. H2RA or prokinetic for one month

Ensure H2RA is taken at night time. PPI treatment should continue whilst taking these medications

Further advice can be obtained from:
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