

Self-inflicted heartburn

Study finds many patients with reflux disease are not improving because they do not follow doctors' orders. **Joan Chew** reports



PHOTO: LIM YAOHUI FOR THE STRAITS TIMES

A new type of proton pump inhibitor has helped Mr Benjamin Lim, a Gerd sufferer, easily maintain his medication regimen and keep heartburn at bay.

Patients here with gastro-oesophageal reflux disease (Gerd) are not helping themselves by ignoring the advice of doctors.

A Changi General Hospital (CGH) study of 202 such patients found that a worrying number of them are not taking their prescribed medicine as they should. Some say they were too busy or that they forgot, according to a local study released last month.

Gerd is a digestive disorder in which contents in the stomach, which are usually acidic, flow back into the oesophagus (food pipe).

This may give rise to heartburn – a burning sensation that rises behind the middle of the breast bone – and acid regurgitation, or symptoms such as chest pain, sore throat, dry cough, bad breath and breathlessness.

The condition is treated with oral medication, such as H2 blockers and proton pump inhibitors, both of which suppress acid production.

These drugs have been shown to be effective up to 90 per cent of the time, so patients “should be quite well if they are compliant”, said Dr Ang Tiing Leong, president of the Gastroenterological Society of Singapore, who was involved in the study that was conducted from last December to April.

Of the 202 patients tracked, nearly three-quarters of them were prescribed medication, with more than 40 per cent having to take it twice a day. But they fared poorly when it came to taking the drugs regularly.

Nearly 20 per cent failed to follow the doctor's instructions on how often to take them, more than 30 per cent did not keep to the timing and close to 40 per cent ignored the requirement to take them close to mealtimes.

Dr Jarrod Lee, a gastroenterologist at Mount Elizabeth Novena Hospital, said proton pump inhibitors should be taken 30 minutes to an hour before meals, up to twice daily. Otherwise, patients may suffer from heartburn and acid regurgitation.

Common excuses cited by patients in the study include being too busy, forgetting and skipping their meals – as medication is usually taken close to mealtimes – and that it was a hassle to follow instructions. Dr Ang, who also heads the

department of gastroenterology and hepatology at CGH, said: “Like any disease, we expected some patients to be non-compliant with their medication, but we were surprised by the magnitude of the problem here.”

Results showed that one-quarter of patients still felt bloated and 19 per cent still had a burning sensation or chest pain. Dr Ang said the high proportion of patients who still suffered symptoms suggested they were not taking their medication as