

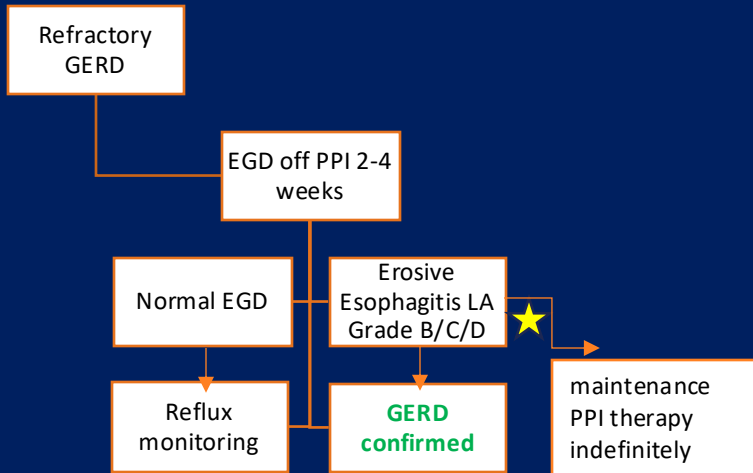


# Emory Faculty Retroflexions: Updates in GERD Management

Navila Sharif, MD in Discussion with Jason Brown, MD



Refractory GERD = persistent heartburn and/or regurgitation despite 8 weeks of BID PPI therapy (AGA 2022)

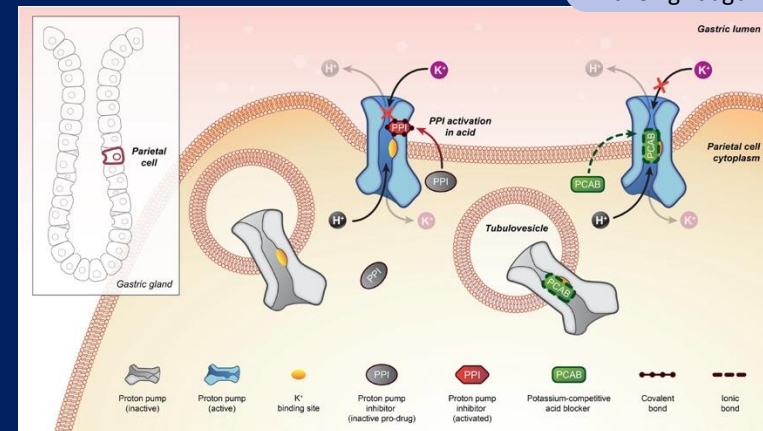


Chen et al. AGA Clinical Practice Update on GERD (Jun 2023)

**Potassium-competitive acid blockers (PCABs)** are a new class of anti secretory drugs that competitively bind to the H<sup>+</sup>/K<sup>+</sup> ATPase enzyme, blocking the final step of acid production in the parietal cells of the stomach

	PCAB	PPI
Prodrug	No	Yes (requires activation by stomach acid)
Onset of action; dose for maximal acid suppression	Faster; 1 dose	Slower; 3-5 doses
Timing	Independent of mealtimes (acid stable)	30-60 min before meal
Half life (hours)	6 - 9 *Longer half life= prolonged gastric acid inhibition	1- 2

MOA of PCAB vs PPI



Laine et al. American Journal of Gastroenterology (Jul 2022)

- PCABs can be considered for:
- PPI-refractory GERD
  - Severe erosive esophagitis- Los Angeles classification of grade C or D
  - H. Pylori (as part of combination therapy)

**Should be used**

- H. Pylori eradication (for most patients)

**May be used**

- LA C/D erosive esophagitis
- BID PPI failure in confirmed GERD
- PUD refractory to PPIs

**PCABs**

**Uncertain potential utility**

- PUD bleeding and high risk stigmata
- On-demand therapy for heartburn symptoms

**Should not be used**

- LA A/B erosive esophagitis
- First line PUD therapy or prophylaxis
- First line for uninvestigated or non-erosive GERD

Patel et al AGA Clinical Practice Update (Nov 2024)

Dr. Brown: "Pay particular attention to evolving data investigating PCAB usage in the fight against H. Pylori."

Dr. Brown: ""From sodium carbonate in ancient Mesopotamia to coral powder in Roman antiquity to H2RAs in the 1960s and PPIs in the 1970s, time and technology march forward in the humanity's battle against heartburn. PCABs will eventually solidify their place--perhaps pre-eminently--as more data combine with lower cost. Stay tuned."

Next steps for PPI refractory disease:

- Ensure proper timing and administration of PPIs
- pH monitoring
  - Acid exposure time (AET): % of time pH in esophagus <4
- High resolution manometry (HRM) to rule out achalasia and absent contractility
- Anti-reflux surgery or TIF (transoral incisionless fundoplication)

**Vonoprazan** was the first PCAB to be FDA approved, initially in November 2023, for treatment of erosive esophagitis and H. pylori, then expanded in July 2024 to include non-erosive GERD