

# A review in general practice: the appropriate prescription of PPIs with those taking aspirin over the age of 70

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## Aims

Are we prescribing proton pump inhibitors (PPIs) to all registered patients who are on aspirin and above the age of 70?

## Methods

Using population reporting, we looked at patients who were:

- > active patients at our practice,
- > over the age of 70,
- > have aspirin as a repeat medication.

If a patient fulfilled all three criteria, we checked if they were on any PPIs, with a further analysis onto the most common PPIs used.

## Results

There were 246 patients who were over the age of 70 and on aspirin as a repeat prescription, and we found that 116 patients were not on any form of PPI. Of those that were (n=130) 88% were on omeprazole, 28% were on lansoprazole and 8% were on ranitidine. We have therefore identified a number of patients who were not receiving any form of gastrointestinal (GI) protection which has significant consequences for our patients' quality of life.

## Conclusion

NICE advises caution in prescribing aspirin for those over the age of 65 due to increased risks of intracranial and GI bleeds, dyspepsia, ulceration and perforation. However, in many patients they are prescribed aspirin for primary and secondary prevention of heart disease, therefore we are advised to use PPIs to reduce this risk. We must improve our staff's awareness, to ensure they check, during routine clinics, if a patient is on aspirin if they are also on PPIs. We have sent these results to all staff to highlight this issue.

As a leading point for this study we can now explore reasons why PPIs were not prescribed and educate our staff as well as prescribe PPIs to offer GI protection. The aim is that this will reduce the rate of peptic ulcers and life-threatening bleeds in our patients. ■

## Conflict of interest statement

This research is important for the Quality and Outcome Frameworks at our practice to ensure we are adequately reducing health risk in patients who are on aspirin among other medications.

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