

## BARRETT OESOPHAGUS

# PPIs might reduce risk of neoplastic progression in Barrett oesophagus

PPIs have become a mainstay of treatment in patients with Barrett oesophagus. Whether PPIs reduce the risk of neoplastic progression in these patients, however, was unclear; concerns had also been raised about the costs and potential adverse effects of prolonged PPI use. New findings, published in *Clinical Gastroenterology and Hepatology*, have now provided clinical evidence that prolonged use of PPIs in patients with Barrett oesophagus is justified.

Florine Kastelein and co-workers conducted a multicentre study of 540 patients with histologically proven Barrett oesophagus. Information on medication use was collected and correlated with the incidence of high-grade dysplasia and oesophageal adenocarcinoma during a median follow-up period of 5.2 years.

PPI use at inclusion into the study or during the follow-up period reduced the risk of neoplastic progression (HR 0.41, 95% CI 0.18–0.93 and HR 0.21, 95% CI

0.07–0.66, respectively). “Overall, PPI use was associated with a 75% reduction in risk of neoplastic progression, independent of age, gender, length of Barrett oesophagus, oesophagitis, histology and use of other medications,” Kastelein says. Moreover, prolonged PPI use and good adherence were associated with an additional protective effect.

“Use of PPIs seem to be an effective strategy to prevent neoplastic progression in patients with Barrett oesophagus, obviating the need for expensive endoscopic mucosal resection, ablation therapies and surgical resection,” explains Kastelein. “Prolonged PPI use is therefore justified in these patients and should be recommended in guidelines,” she adds.

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**Original article** Kastelein, F. *et al.* Proton pump inhibitors reduce the risk of neoplastic progression in patients with Barrett's esophagus *Clin. Gastroenterol. Hepatol.* doi:10.1016/j.cgh.2012.11.014