Characteristics of the use of Proton Pump Inhibitors among Older People with Intellectual Disability

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Background Proton pump inhibitor (PPI) use is common despite evidence of the potential for harm with long term use is growing. Information about use in older people with ID, a vulnerable group, is limited despite a high rate of gastrointestinal conditions.

Purpose To characterise the use PPIs among older people with intellectual disability and explore the associations with factors known to influence medication use in this population.

Method The Intellectual Disability Supplement to the Irish Longitudinal Study on Ageing (IDS-TILDA) is a longitudinal cohort comprising a national randomly selected, sample of people of 40 years and older with intellectual disability from the National Intellectual Disability Database. Data from IDS-TILDA Wave 2 on 677 persons in 2013/2014 with medication information, was used to extract PPI use and gender, place of residence, level of ID and age. Medicines were classified with WHO Anatomical Therapeutic Chemical (ATC) classification and doses were classed as low, medium and high dose using the Summary of Product Characteristics published on the website of the Medicines Regulator. Descriptive statistics and bivariate analyses were performed.

Findings Over a quarter, 27.3% (n=185), of participants reported use of PPI, and 54% (n=100) were female. The largest proportion of PPI users (54%) were aged between 50-64 yrs. Only 42.7% of PPI users had an indication of PPI use (Peptic Ulcer, Gastroesophageal reflux disease(GORD) or/and an NSAID use) and GORD (38%) was the most common. Most (70%) PPIs were used in medium doses. Use among those in residential care homes (54.3%) was much higher than for those living independently or with family (7%). PPI use among those who have severe/ profound ID level was 26% higher than those with mild ID level. Information about the length of PPI use was missing for 33% but of those with data, just over half recorded using the PPI for more than a year. Lansoprazole, omeprazole and esomeprazole were all used in over 25% of PPI users. NSAID use without any record of a PPI was reported in 8% of participants.

Conclusion PPI use among older people with intellectual disability is prevalent and frequently long term, often without a clear indication. PPI use needs to be assessed regularly, especially among the oldest and those with severe/profound ID, in order to avoid inappropriate long term use that could expose them to risk and potential harm.