

STOP PPIS - PROTON PUMP INHIBITORS DO NOT IMPROVE OUTCOMES AFTER BAND LIGATION FOR ESOPHAGEAL VARICES IN CIRRHOSIS: A SYSTEMATIC REVIEW AND META-ANALYSIS

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Poster

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A systematic review and meta-analysis of 11 studies involving 7,459 cirrhotic patients undergoing endoscopic band ligation of esophageal varices found that proton pump inhibitors do not significantly reduce bleeding or mortality when analyzed by randomized controlled trials or adjusted observational data.

KEY POINTS

- Pooled randomized controlled trial data from 445 patients showed no significant association between PPI use and reduced bleeding (RR 0.71; 95% CI: 0.39-1.30) or mortality (RR 0.75; 95% CI: 0.23-2.53) within 8 weeks after endoscopic band ligation
- Adjusted observational data from 5,907 patients similarly showed no significant association between PPI use and reduced bleeding (OR 0.64; 95% CI: 0.33-1.23)
- Subgroup analysis by indication for endoscopic band ligation (elective versus emergency) showed no significant differences in outcomes
- PPIs had no significant impact on length of hospitalization, and the authors conclude the findings do not support routine PPI use to reduce severe complications after endoscopic band ligation in cirrhotic patients with esophageal varices

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