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Summary

PRIOR PROTON PUMP INHIBITOR (PPI) USAGE IS AN INDEPENDENT RISK FACTOR FOR A GUT-TO-BRAIN PATHWAY IN PATIENTS WITH DISORDERS OF BRAIN GUT INTERACTION (DBGI) IN GENERAL PRACTICE

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Colorectal

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In a retrospective study of 152,674 UK primary care patients with disorders of brain-gut interaction and psychological disorders, prior proton pump inhibitor use doubled the odds of receiving a gut diagnosis before a mood or anxiety diagnosis.

KEY POINTS

- Of 152,674 patients with both a disorder of brain-gut interaction (IBS and/or functional dyspepsia) and a psychological disorder, 56.2% received the psychological diagnosis first while 42.9% received the DBGI diagnosis first.
- Prior PPI use was associated with twice the odds of DBGI diagnosis preceding psychological diagnosis (OR=2.0, 95% CI 1.94-2.06), with similar patterns for IBS only, FD only, and overlap presentations.
- Female gender, prior gastrointestinal infection, and prior antibiotic use also significantly increased odds of DBGI-first diagnosis in the multivariate model.
- Alcohol-related diseases, asthma, and ever having used PPIs or NSAIDs reduced the odds of receiving a DBGI diagnosis before a psychological diagnosis.
- The authors suggest prior PPI use may indicate presence of upper gut DBGI or may reflect PPI-induced gut microbiome changes, though causality cannot be determined from this retrospective analysis.

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