

LANSOPRAZOLE

Class: Proton Pump Inhibitor; Substituted Benzimidazole

Indications:

Short-term (4 weeks) treatment of active duodenal ulcers; maintenance treatment of healed duodenal ulcers; as part of a multidrug regimen for *H. pylori* eradication to reduce the risk of duodenal ulcer recurrence; short-term (up to 8 weeks) treatment of active benign gastric ulcer; treatment of NSAID-associated gastric ulcer; to reduce the risk of NSAID-associated gastric ulcer in patients with a history of gastric ulcer who require an NSAID; short-term treatment of symptomatic GERD; short-term (up to 8 weeks) treatment for all grades of erosive esophagitis; to maintain healing of erosive esophagitis; long-term treatment of pathological hypersecretory conditions, including Zollinger-Ellison syndrome.
OTC labeling: Relief of frequent heartburn (≥ 2 days/week)

Available dosage form in the hospital:

LANSOPRAZOLE 15MG CAP, LANSOPRAZOLE 30MG CAP

Trade Names:

Dosage:

-Symptomatic GERD: Oral: Short-term treatment: 15 mg once daily for up to 8 weeks.

-Erosive esophagitis: Oral: Short-term treatment: 30 mg once daily for up to 8 weeks; continued treatment for an additional 8 weeks may be considered for recurrence or for patients who do not heal after the first 8 weeks of therapy; maintenance therapy: 15 mg once daily.

-Hypersecretory conditions: Oral: Initial: 60 mg once daily; adjust dose based upon patient response and to reduce acid secretion to <10 mEq/hour (5 mEq/hour in patients with prior gastric surgery); doses of 90 mg twice daily have been used; administer doses >120 mg/day in divided doses .

-Duodenal ulcer: Oral: Short-term treatment: 15 mg once daily for 4 weeks; maintenance therapy: 15 mg once daily.

-Helicobacter pylori eradication:

-Manufacturer labeling: 30 mg 3 times daily administered with amoxicillin 1000 mg 3 times daily for 14 days **or** 30 mg twice daily administered with amoxicillin 1000 mg *and* clarithromycin 500 mg twice daily for 10-14 days.

-American College of Gastroenterology guidelines (Chey, 2007):

-Nonpenicillin allergy: 30 mg twice daily administered with amoxicillin 1000 mg *and* clarithromycin 500 mg twice daily for 10-14 days.

-Penicillin allergy: 30 mg twice daily administered with clarithromycin 500 mg *and* metronidazole 500 mg twice daily for 10-14 days **or** 30 mg once or twice daily administered with bismuth subsalicylate 525 mg *and* metronidazole 250 mg *plus* tetracycline 500 mg 4 times daily for 10-14 days.

-Gastric ulcer: Oral: Short-term treatment: 30 mg once daily for up to 8 weeks .

-NSAID-associated gastric ulcer (healing): Oral: 30 mg once daily for 8 weeks; controlled studies did not extend past 8 weeks .

-NSAID-associated gastric ulcer (to reduce risk): Oral: 15 mg once daily for up to 12 weeks; controlled studies did not extend past 12 weeks.

-Heartburn (OTC labeling): Oral: 15 mg once daily for 14 days; may repeat 14 days of therapy every 4 months. Do not take for >14 days or more often than every 4 months, unless instructed by healthcare provider.

Stress ulcer prophylaxis, ICU patients (unlabeled use): Oral: 30 mg once daily. **Note:** Intended for patients with associated risk factors (eg, coagulopathy, mechanical ventilation for ≥ 48 hours, severe sepsis); discontinue use once risk factors have resolved (Dellinger, 2013).

Renal Impairment:

No dosage adjustment necessary.

Hepatic Impairment:

Bioavailability increased in hepatic impairment. Consider dose reduction in severe impairment.

Common side effect:

1% to 10%:

Central nervous system: Headache , dizziness .

Gastrointestinal: Diarrhea , abdominal pain, constipation, nausea.

Pregnancy Risk Factor: B