

OMEPRAZOLE tab/vial

Class: Proton Pump Inhibitor

Indications:

- Short-term (4-8 weeks) treatment of active duodenal ulcer disease or active benign gastric ulcer; treatment of heartburn and other symptoms associated with gastroesophageal reflux disease (GERD);
- short-term (4-8 weeks) treatment of endoscopically-diagnosed erosive esophagitis; maintenance healing of erosive esophagitis; long-term treatment of pathological hypersecretory conditions (eg, Zollinger-Ellison syndrome); as part of a multidrug regimen for *H. pylori* eradication to reduce the risk of duodenal ulcer recurrence
- OTC labeling: Short-term treatment of frequent, uncomplicated heartburn occurring ≥ 2 days/week

Available dosage form in the hospital:

OMEPRAZOLE 40MG VIAL, OMEPRAZOLE 20MG MR TAB, OMEPRAZOLE 40MG TAB

Dosage:

- **Active duodenal ulcer:** Oral: 20 mg once daily for 4-8 weeks
- **Gastric ulcers:** Oral: 40 mg once daily for 4-8 weeks
- **Symptomatic GERD (without esophageal lesions):** Oral: 20 mg once daily for up to 4 weeks
- **Erosive esophagitis:** Oral: 20 mg once daily for 4-8 weeks; maintenance of healing: 20 mg once daily for up to 12 months total therapy (including treatment period of 4-8 weeks)
- **Helicobacter pylori eradication:** Oral: Dose varies with regimen:

-Manufacturer labeling:

40 mg once daily administered with clarithromycin 500 mg 3 times daily for 14 days

or

20 mg twice daily administered with amoxicillin 1000 mg *and* clarithromycin 500 mg twice daily for 10 days.

****Note:** Presence of ulcer at time of therapy initiation may necessitate an additional 14-18 days of omeprazole 20 mg daily (monotherapy) after completion of combination therapy.

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

-Nonpenicillin allergy: 20 mg twice daily administered with amoxicillin 1000 mg *and* clarithromycin 500 mg twice daily for 10-14 days

-Penicillin allergy: 20 mg twice daily administered with clarithromycin 500 mg *and* metronidazole 500 mg twice daily for 10-14 days

or

20 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

-Pathological hypersecretory conditions: Oral: Initial: 60 mg once daily; doses up to 120 mg 3 times daily have been administered; administer daily doses >80 mg in divided doses

-Stress ulcer prophylaxis, ICU patients (unlabeled use): Oral: 40 mg once daily (Levy, 1997) or may administer 40 mg loading dose followed by 20-40 mg once daily (ASHP, 1999). **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). Omeprazole 20 mg via NG tube once daily may be less effective in some critically ill populations compared to 40 mg via NG tube once daily (Balaban, 1997).

- Frequent heartburn (OTC labeling): Oral: 20 mg once daily for 14 days; treatment may be repeated after 4 months if needed

Common side effect:

Central nervous system: Headache , dizziness

Dermatologic: Rash

Gastrointestinal: Abdominal pain , diarrhea , nausea , vomiting , flatulence , acid regurgitation , constipation

Neuromuscular & skeletal: Back pain , weakness ,

Respiratory: Upper respiratory infection , cough

Pregnancy Risk Factor: C