

**Clinical Guideline:** Dyspepsia Site: FPH

* Upper abdominal pain or discomfort
* Abdominal bloating
* Nausea and vomiting
* Heartburn
* Pain worse after eating or better with food
* Pain wakes at night

History

General Information

**Lifestyle advice:**

Healthy eating; weight reduction; smoking cessation; promote continued use of antacid/alginates.

**Medication review:**

Calcium antagonists, Nitrates, Theophyllines, Bisphosphonates, Corticosteroids, NSAIDs

**Medication:**

Full dose PPI one month and review

No response: try H2RA +/- prokinetic

Low dose treatment as required

Care with rebound when weaning off; cover with antacid

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| --- | --- | --- | --- |
| PPI doses | High-dose | Full-dose | Low-dose |
| Omeprazole | 40mg | 20mg | 10mg |
| Esomeprazole | 40mg | 20mg | - |
| Lansoprazole | - | 30mg | 15mg |
| Pantoprazole | - | 40mg | 20mg |
| Rabeprazole | - | 20mg | 10mg |

Advice and Treatment

**Consider referral if:**

Chronic GI bleeding

Progressive unintentional weight loss

Progressive difficulty swallowing

Persistent vomiting

Iron deficiency anaemia

Epigastric mass or suspicious barium meal.

Failure of treatment

Barretts surveillance

Referral Guidelines – red flag signs

Do we have H Pylori stool test yet?

Investigation

Abdominal exam

Examination

Occasional heartburn is normal