

Why You Should Get Off Prescription Acid-Reducing Drugs ASAP!

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Treatment with the anti-heartburn drugs known as proton pump inhibitors (PPIs) for eight weeks induces acid-related symptoms like heartburn, acid regurgitation and dyspepsia once treatment is withdrawn in healthy individuals, according to a new study.

More than 40 percent of healthy volunteers, who had never been bothered by heartburn, acid regurgitation or dyspepsia, developed such symptoms in the weeks after cessation of PPIs.

The use of PPIs for acid-related symptoms and disorders is extensive and rapidly escalating. Rebound acid hypersecretion, defined as an increase in gastric acid secretion above pre-treatment levels following antisecretory therapy, has been observed within two weeks after withdrawal of treatment and can lead to acid-related symptoms and possibly PPI dependency.

Sources:

» [American Gastroenterology Association July 1, 2009](#)

» [Gastroenterology July 2009: 137\(1\):80-7, 87](#)

Dr. Mercola's Comments:

If you have heartburn, acid reflux, gastroesophageal reflux disease (GERD), peptic ulcer disease or any acid-related condition, chances are very high that you've been offered a prescription for a proton pump inhibitor (PPI)

PPIs like Prilosec, Nexium and Prevacid are among the most commonly prescribed drugs in the world, and their use for treating acid-related symptoms is increasing rapidly.

But these drugs are not only vastly overused ... they're very dangerous as well.

To start, they actually CAUSE the very type of symptoms that they're intended to prevent if you stop taking them.

In the study above, more than 40 percent of healthy volunteers experienced heartburn, acid regurgitation and dyspepsia (pain and fullness in your abdomen) in the weeks after stopping the drugs. These were symptoms they did NOT have before!

It appears the drugs lead to "rebound acid hypersecretion," which is an increase in gastric acid secretion *above pre-treatment levels* within two weeks of stopping the drugs.

Essentially, because these drugs slam the brakes on the acid-producing pumps in your stomach, when you stop taking them that built-up acid can be unleashed with a vengeance.

Meanwhile, studies show that up to 33 percent of people taking PPIs continue to refill their prescriptions without an apparent need for them. Could it be that many of these people continue to refill their prescriptions because they have severe withdrawal symptoms each time they run out ... and are assuming they need MORE of the drug to help them?

This is a vicious cycle -- one that can easily lead to tolerance and dependency on these drugs. As the researchers of the above study astutely point out:

"If rebound acid hypersecretion induces acid-related symptoms, this might lead to PPI dependency. Our results justify the speculation that PPI dependency could be one of the explanations for the rapidly and continuously increasing use of PPIs."

Acid-Reducing Drugs are the Opposite of What Most People With Acid Reflux Need

As Dr. Jonathan Wright explained in detail in an interview I did with him last year (if you're a [member of my Inner Circle](#), you may have received it already), heartburn and GERD are almost always caused by a LACK of stomach acid, rather than an overproduction thereof.

Further, acid reflux (of which heartburn is the primary symptom) is commonly related to hiatal hernia -- a condition in which the acid is coming out of your stomach, where it's supposed to remain.

After food passes through your esophagus into your stomach, a muscular valve called the lower esophageal sphincter (LES) closes, preventing food or acid to move back up. Gastroesophageal reflux occurs when the LES relaxes inappropriately, allowing acid from your stomach to flow (reflux) backward into your esophagus.

An organism called helicobacter pylori (initially called campylobacter) can also cause a chronic low-level inflammation of your stomach lining, and is responsible, or at least a major factor, for producing many of the symptoms of acid reflux.

There are actually over 16,000 articles supporting the fact that suppressing stomach acid does not treat the problem. It only treats the symptoms. And one of the explanations for this is that when you suppress the amount of acid in your stomach, you decrease your body's ability to kill the helicobacter bacteria. So it actually makes your condition worse and perpetuates the problem.

More Reasons Why Reducing Your Stomach Acid is a Risky Bet

When you take PPIs, which significantly reduce the amount of acid in your stomach, it impairs your ability to properly digest food.

Reduction of acid in your stomach also diminishes your primary defense mechanism for food-borne infections, thereby increasing your risk of food poisoning.

Additionally, if you fail to digest and absorb your food properly, you will not only increase your risk of stomach atrophy but also nearly every other chronic degenerative disease.

These drugs have also been linked to an increased risk of pneumonia, and result in an elevated risk of bone loss. The risk of a bone fracture has been estimated to be over 40 percent higher in patients who use these drugs long-term.

If You're Already Taking These Drugs, Avoid Stopping Cold Turkey

You should NEVER stop taking proton pump inhibitors cold turkey. You have to wean yourself off them gradually or else you'll experience a severe rebound of your symptoms, and the problem may end up being worse than before you started taking the medication.

Ideally, you'll want to get a lower dose than you're on now, and then gradually decrease your dose. Once you get down to the lowest dose of the proton pump inhibitor, you can start substituting with an over-the-counter H2 blocker like Tagamet, Cimetidine, Zantac, or Ranitidine. Then gradually wean off the H2 blocker over the next several weeks.

Natural Treatment Options for Heartburn, GERD and Acid Reflux

As I explained in my recent [Acid Reflux video](#), while you wean yourself off these drugs (if you're already on one), you'll want to start implementing a lifestyle modification program that can eliminate this condition once and for all.

These strategies include:

- **Eliminating food triggers** -- Food allergies can be a problem, so you'll want to completely eliminate items such as caffeine, alcohol, and all nicotine products.
- **Increasing your body's natural production of stomach acid** -- Like I said earlier, acid reflux is not caused by too much acid in your stomach -- it's usually a problem with too little acid. One of the simplest

strategies to encourage your body to make sufficient amounts of hydrochloric acid (stomach acid) is to consume enough of the raw material.

One of the simplest, most basic food items that many people neglect is a high quality sea salt (unprocessed salt).

I recommend eliminating [processed, regular table salt](#) for a lot of different reasons, all of which I've reviewed before. But an unprocessed salt like [Himalayan salt](#) -- one of the best salts on the planet -- will not only provide you with the chloride your body needs to make hydrochloric acid, it also contains over 80 trace minerals your body needs to perform optimally, biochemically.

- **Taking a hydrochloric acid supplement** -- Another option is to take a betaine hydrochloric supplement, which is available in health food stores without prescription. You'll want to take as many as you need to get the slightest burning sensation and then decrease by one capsule. This will help your body to better digest your food, and will also help kill the helicobacter and normalize your symptoms.
- **Modifying your diet** – Eating large amounts of processed foods and sugars is a surefire way to exacerbate acid reflux as it will upset the bacterial balance in your stomach and intestine.

Instead, you'll want to eat a lot of vegetables, and high quality, organic, biodynamic, and [locally grown foods](#). You can also supplement with a high quality probiotic or make sure you include fermented foods in your diet. This will help balance your bowel flora, which can help eliminate helicobacter naturally.

- **Optimizing your vitamin D levels** -- As I've mentioned many times in the past, vitamin D is essential, and it's essential for this condition as well because there's likely an infectious component causing the problem. Once your [vitamin D levels are optimized](#), you're also going to optimize your production of 200 antimicrobial peptides that will help your body eradicate any infections that shouldn't be there.

You'll want to make sure your vitamin D level is about 60 ng/ml, and I strongly recommend you use LabCorp, which is a high quality testing facility.

As I've discussed in many previous articles, you can increase your vitamin D levels through appropriate amounts of [sun exposure](#), or through the use of a [safe tanning bed](#).

If neither of those are available, you can take an oral vitamin D3 supplement. However, whenever you use oral vitamin D, it's imperative you get tested regularly to make sure you're not reaching toxic levels.

- Implementing an exercise routine -- Exercise is yet another way to improve your body's immune system, which is imperative to fight off all kinds of infections.
- For more tips, please **read the ["Top 20 List"](#)**.

Related Links:

- » [How the Drug Companies Deceive You--The Inside Story of Nexium](#)
- » [News Flash: Acid Reflux Caused by Too Little Acid, Not Too Much...](#)
- » [Why Inhibiting Acid Production With Prilosec and Prevacid Could Make Ulcers Worse](#)

Reference website: <http://articles.mercola.com/sites/articles/archive/2009/09/05/Why-You-Should-Get-Off-Prescription-Acid-Reducing-Drugs-ASAP.aspx>