The Association of Proton Pump Inhibitors with the Risk of Dementia

Hello, this is Dr. Sonya Hardin, Program Director for the Geriatric Workforce Enhancement Grant at East Carolina University. Podcast are being developed for primary care with topics in neurology. This short podcast is focused on the association of Proton Pump Inhibitors with the risk of dementia.

In 2015, the German study on aging, cognition, and dementia in primary care was published. This study included 2,911 persons aged 75 years and older, and they looked at the use of Protein Pump Inhibitors and found that it was associated with an increased risk of dementia. As well as an increased risk of Alzheimer's disease. The study used a very large German insurance database to link PPI use and subsequent incidents of dementia, using both in-patient and out-patient medical records.

Determining whether or not your patient needs to continue on PPIs is very important. While the incidents of dementia was associated with PPI use, we must be aware that this is only one study. Protein Pump Inhibitors were introduced in the 1980s for the treatment of acid related disorders of the upper gastrointestinal tract, including heartburn, peptic ulcers, and gastrointestinal reflux disorders. The drugs are available in the United States both as prescription and non-prescription drugs. Several studies have reported that two to three percent of the population older than 65 years of age are receiving long-term PPI therapy in the United States.

We see the highest usage of PPIs among women. Women use PPIs at 8.5% and men at 7%. Whether PPIs actually cause an increase in the risk of dementia is therefore an important question requiring further evaluation. But there does seem to be some biological plausibility to the hypothesis, as PPIs can cross the blood-brain barrier, and they can increase both production and degradation of amyloid, at least in animal studies. And the PPIs also bind to [TAH 00:02:50].

Today, I would like for your takeaway, to be, to pause when you have patients that are older adults who have been on long-term PPIs, and to re-evaluate whether or not there is a need to continue on a PPI, given the results of this study. While an important issue was raised by this study, we continue to need more information, but at this point in time, advisement is to reconsider the use of PPIs with older adults.

Thank you for listening to this podcast funded by the Geriatric Workforce Enhancement Grant through HRSA. We appreciate you listening to us today, and there will be more podcasts to follow. Thank you.