Effect of Proton Pump inhibitors on laryngopharyngeal reflux disease –

A Prospective study

ABSTRACT

Objective

1. To study the effect of proton pump inhibitors on laryngeal reflux symptom index.
2. To study the effect of proton pump inhibitors on laryngeal reflux finding score.

Study Design

Prospective study with quasi experimental design

Materials and Methods

85 patients with symptoms suggestive of laryngopharyngeal reflux disease were studied. Patients were evaluated using Reflux Symptom Index, a set of nine self-assessment questions that are graded from 0 to 5 (with a total score of 0 – 45) according to severity and those with a score of 3 or more in any of the symptom scores were selected and subjected to endoscopic examination, for the assessment of reflux finding score.

Subjects were evaluated as 2 (two) groups.

Group 1: Pretreatment group - Patients with Laryngopharyngeal reflux disease who were evaluated for reflux symptom index and reflux finding score.

Group 2: Posttreatment Group – Patients in the pretreatment group after treatment who were again studied for reflux symptom index and reflux finding score.

The Pretreatment group acted as control for posttreatment group.
Results

The mean reflux symptom index was 20.2 in pretreatment group and 11.2 posttreatment, with medians of 20 and 11 respectively.

The pretreatment mean reflux finding score was 9.9 and post treatment was 6.0, with medians of 9 and 5 respectively.

All the components of both reflux symptom index and reflux finding score showed significant reduction, following 6 weeks of treatment with proton pump inhibitors.

Conclusions

- LPRD is more common in the age group of 31-40 years.
- LPRD is more common among females.
- Among all the symptoms clearing of throat was most common.
- Proton pump inhibitors are highly effective in controlling laryngeal reflux symptom index and laryngeal reflux finding score.

Keywords

Laryngopharyngeal reflux, laryngopharyngeal reflux disease, reflux symptom index, reflux finding score, proton pump inhibitors, LPRS, RSI, RFS