

**ABSTRACT**

**DRUG UTILIZATION OF HISTAMINE RECEPTOR  
ANTAGONIST AND PROTON PUMP INHIBITOR (PPI) IN  
CHRONIC KIDNEY DISEASE PATIENTS**  
(The study was performed in Nephrology Outpatients Departement of  
Dr. Soetomo Hospital Surabaya)

Okky Sari Rahayu

**BACKGROUND:** Chronic kidney Disease (CKD) is becoming a major health problem worldwide. CKD defined as abnormalities of kidney structure or function during three months or later and classified based on damage level and GFR category. CKD patients are more susceptible to dyspepsia and ulcer because of uremic condition, hypergastrinemia, and the activity of sympathetic nervous system so that they need histamine receptor antagonist (H2RA) and proton pump inhibitor (PPI) to control the symptom.

**OBJECTIVE :** The aim of this study is to find out the drug utilization pattern of H2RA and PPI for CKD patients in Nephrology Outpatients Department of Dr. Soetomo Hospital Surabaya.

**SUBJECTS AND METHODS:** This study was conducted by cross sectional method, data was taken during April – June 2014. The inclusion criteria is CKD patients from stage 3 until 5 whose got therapy of H2RA and PPI.

**RESULTS:** From 69 patients, obtained that incidence of CKD were greater in women (63,64%) than in men (36,36%) and the highest incidence were in the age of 51-60 years old (37,68%). Most of them were stage V (49,09%) CKD patients. The most complication or comorbid in CKD patients were hypertension (76,36%) and nephropathy diabetic (21,82%). The H2RA and PPI used in management of dyspepsia and ulcer in CKD patients were ranitidine and omeprazole. Dosage regimentation of omeprazol were 20 mg once or twice daily and for ranitidin is 150 mg twice daily. Duration of omeprazol therapy were 7 to 13 days and ranitidine therapy is less than 7 days. Drug related problem was identified to be potensial drug interaction.

**KEYWORDS :** Histamine receptor antagonist, Proton pump inhibitor (PPI), CKD, Dyspepsia and ulcer.