

ABSTRACT

**STUDY OF *PROTON PUMP INHIBITOR* USE IN CIRRHOSIS
HEPATIC PATIENTS WITH HEMATEMESIS MELENA**

(The study was conducted in Inpatient of Airlangga University Hospital
Surabaya)

ZAKIYAH

Cirrhosis is a diffuse process characterized by fibrosis and changes in the normal liver structure and leads to improper liver function, thus triggering an increase in hepatic vascular resistance that leads to hematemesis melena. Proton Pump Inhibitor (PPI) is an anti-acid secretory agent to prevent re-bleeding and may be given as adjunctive therapy in hepatic cirrhosis patients with hematemesis melena. This study aimed to examine the characteristics of samples, the profile of PPI use during inpatient care, and to identify the possibility of Drug Related Problem (DRP) in hepatic cirrhosis patients with hematemesis melena. The study had been conducted from January 1, 2014 to December 31, 2016. This study was observational retrospective study which was analyzed descriptively from April to June 2017 by time limited sampling method and had been through etic review. Based on the inclusion criteria, 104 hepatic cirrhosis patients were found and there were 39 with hematemesis melena who was given PPI as therapy. The most widely use of PPI were intravenous route omeprazole with dose of 1x40mg and 2x40mg (61,54%), oral route of omeprazole with dose of 2x20 mg (7,69%), intravenous route of pantoprazole with dose of 1x40mg and 2x40mg (5,13%), and intravenous route of lansoprazole with dose of 1x30mg and 2x30mg (48,72%). The DRP was found in 10,26% (n=23) of patients and it was allegedly occurred because of the interaction between omeprazole and furosemide. Finally, it was recommended to perform collaboration between physician and pharmacist to optimize therapy by preventing drug interaction and monitoring adverse effect in PPI use.