

# STUDY REPORT SYNOPSIS

Finished product: not applicable

Active ingredient: not applicable

## Study No. NIS-GAL-NEX-2010/1

A National, Multicentre, Open-label, Non-comparative, Non-interventional survey examining the frequency and severity of acid related symptoms while taking Nexium

**Developmental phase:** IV (non-interventional study) **Study completion date:** 10 November 2010 **Date of Report:** 07 October 2011

#### **OBJECTIVES:**

The primary objective of this NIS was to evaluate the effectiveness of Nexium at alleviating frequency and severity of acid related symptoms.

Secondary objectives of the NIS were:

- 1. To follow the frequency, type and severity of symptoms in subjects consulting the doctors with upper GI symptoms.
- 2. Evaluate with which treatment regimen and on which indications acid suppression with isomeric proton pump inhibitor is used in routine clinical practice in Albania.
- 3. Evaluate the tolerability of Nexium in patients with upper GI symptoms.

#### **METHODS:**

Patients had three study related-visits: visit 1 (day 0), visit 2 (2-4 weeks after visit 1) and visit 3 (8-12 weeks after visit 1). At each visit the following tools were used: recording of data in CRF (by investigator) and filling in the Patient's questionnaire.

#### **RESULTS:**

#### Demographic data

The study was conducted in 26 centers with the participation of 37 Gastroenterologists and Endoscopists. They included a total of 484 patients in the study. The average age of patients included in the study was 46.5 years  $\pm$  15.7

The major part of the patients included were males (55.4 %). From the recorded habits the most common was the habit of smoking (28.1 %) even if the most part of them were non-smoker (68.2%). A small percentage 6.4 % had the habit of consuming alcohol more

than 2 units/day, 22.3 % less than 2 units/day and the major part of the patients included were non-alcoholists.

## The frequency and severity of acid related symptoms:

All symptoms typically improved at visit 2 vs visit 1 and at visit 3 vs visit 2 and 1, based on the evaluation of the Gastroenterologists:

- The frequency and severity of pyrosis decreased substantially and linearly from the first visit to the third visit.
- The frequency and severity of regurgitation decreased considerably and linearly from the first visit to the third visit
- The frequency and severity of epigastric pain declined enormously and linearly from the first visit to the third visit
- The frequency and severity of pain or uncomfortable feeling in the stomach declined considerably and linearly from the first visit to the third visit
- The frequency and severity of dysphagia decreased from the first visit to the third visit
- The frequency and severity of nausea declined considerably and linearly from the first visit to the third visit
- The frequency and severity of sore throat or cough declined enormously and linearly from the first visit to the third visit

The prevalence of patients' self-reported complaints decreases sharply form the first visit to the second visit, and particularly so from the second visit to the third visit. In the third visit:

The frequency of waking up due to GI symptoms was occasionally in only 2 % of the cases; the frequency of affecting patient's daily activities was occasionally in 6 % of the cases; frequency of taking bicarbonates or other symptomatic treatments was occasionally in only 0.2 % of the cases.

## Treatment regimen and indications:

About 36 % of the patients had a history of more than a year with GI symptoms. More than half (55,8 %) were treated for GERD, 26.4 % for the presence of Helicobacter Pylori and the other percentage for other reasons.

The Nexium dose 20 mg was much more prevalent in the first visit (58,7 %) so in the second (69.2%) and the third visit (84.1%).

The treatment regimen in the third visit differed significantly from the treatment regimen in the second visit: more patients take Nexium as needed in the third visit (13.6%) compared with the second visit (0.6%)

### Tolerability:

Nexium was very well tolerated. No adverse events were reported.