

## STUDY REPORT SUMMARY

## **ASTRAZENECA PHARMACEUTICALS**

# FINISHED PRODUCT: ACTIVE INGREDIENT:

Study No: NIS-GFR-DUM-2008/1

Prevalence of gastroesophageal reflux disease (GERD) during childhood in France

**Developmental phase:** 

**Study Completion Date:** September 2008

Date of Report: October 2008

#### **OBJECTIVES:**

The objectives of this study were to assess prevalence of gastroesophageal reflux during childhood and teenage years in France and to describe patients' symptoms and gastroesophageal reflux management.

#### **METHODS:**

Data were collected on an online studies management platform, among a representative sample of 404 GPs and 180 paediatricians (P). All the children and teenagers between 0 and 17 years old consulting a physician for 3 days running (2 periods of collection: 14<sup>th</sup>-16<sup>th</sup> May and 26<sup>th</sup>-28<sup>th</sup> May 2008) were included. If the patient presented a gastroesophageal reflux (GER), the physician completed an additional form relative to this disease.

### **RESULTS:**

10394 patients were included in the study (5143 by GPs and 5251 by P). Prevalence of GER among children and teenagers consulting a physician was:15.1% (N=776) for GPs (28.7% (N=449) for children 0-23 months old; 7.9% (N=176) for children 2-11 years old and 11.0% (N=151) for teenagers 12-17 years old). It was: 15.1% (N=793) for P (22.7% (N=706) for children 0-23 months old; 4.0% (N=74) for children 2-11 years old and 5.1% (N=13) for teenagers 12-17 years old). Extrapolating to the global French population, prevalence of GER among children and teenagers less than 18 is: 10.3% (0-23 months old: 24.4%; 2-11 years old: 7.2%; 12-17 years old: 10.7%). Among 0-23 months old children, the symptoms of GER most often reported were regurgitation (85%), tears (45%); 42% showed food problems and 10% a stridor. The examination most often reported was the pH measurement

(13%). Non medical advices were to decrease baby's bottle volume or to thicken the meals (85%) and to heighten the head of the bed (83%). 79% received a medicine (antiacids: 71%, antiemetic drug: 64%, PPI: 20%), 24% were addressed to a colleague (paediatrician gastroenterologist (PG): 49%, P: 37%). Among children 2-11 years old, the most common symptoms reported were: pyrosis (37%). regurgitation (36%) and vomiting (32%); 68% showed a chronic cough, 35% ORL symptoms and 24% asthma. The examinations the most often reported were: PH measurement (24%) and endoscopy produced by a fibroscope (18%). Non medical advices reported were to heighten the head of the bed (62%) and to stop some food (56%). 90% were given a medicine (antiacids: 61%, antiemetic drug: 49%, PPI: 37%). 43% were addressed to a colleague (PG: 48%, gastroenterologist: 25%). Among teenagers 12-17 years old, the most common symptoms reported were: pyrosis (86%), regurgitation (33%); 33% showed a chronic cough. The examination the most often reported was endoscopy produced by a fibroscope (30%). Non medical advices reported were to stop some food (73%) and to heighten the head of the bed (52%). 96% were given a medicine (antiacids: 54%, antiemetic drug: 25%, PPI: 64%). 34% were addressed to a colleague (gastroenterologist: 72%).