

PROPHYLAXIS OF ACUTE GASTRIC HEMORRHAGE FROM STRESS - INDUCED LESIONS - COMPARISON OF PIRENZEPINE AND CIMETIDINE IN INTENSIVE CARE UNITS.

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Data are given from a prospective, comparative, randomized and double blind study with 110 critically ill patients admitted to the ITU and treated prophylactically with CIMETIDINE (46 cases) or PIRENZEPINE (64 cases) by means of i.v. infusions, at increasing doses according to gastric PH. (CIMETIDINE up to 2400 mg/day, PIRENZEPINE up to 90 mg/day)

Patients with history of digestive pathology or hematic alterations were excluded. Bleeding due to hemorrhagic gastric lesions confirmed by endoscopy and usual lab. tests occurred in 8 patients during the 2nd and 13th days of treatment with CIMETIDINE while no hemorrhage was observed in the PIRENZEPINE group ($P < 0.004$).

The following risk factors were present in the patients with bleeding episodes: Neurological (5 p) sepsis (4 p) renal failure (2 p) shock (2 p) hepatic failure (1 p).

Gastric PH immediately before bleeding was higher than 4.5 in 5 patients and lower than 4.5 in 3 patients, correlation between gastric PH and bleeding was therefore negative. No significant differences were observed between the gastric PH of both therapeutic groups.

Absence of bleeding during the prophylaxis with PIRENZEPINE may be attributable not only to its acid blocking capacity but to a favorable change in gastric defensive factors in the critically ill patients.