24 hr heartburn protection for less than £1 a day[1]

Cost comparison table comparing once daily dosing with Nexium Control with shorter acting treatments that may require multiple doses per day.

Product name	Pack size	Max daily dose	MRRP	Daily cost
Nexium Control Tablets	14	1	£11.99	£0.86
Nexium Control Capsules	14	1	£12.99	£0.93
Gaviscon peppermint tablets	48	16	£6.70	£2.23
Gaviscon Double Action Tablets	48	16	£8.49	£2.83
Gaviscon Original Aniseed Relief	600ml	80ml	£10.99	£1.47
Gaviscon Double Action Liquid	600ml	80ml	£13.99	£1.87
Gaviscon Double Action Liquid sachets	24	8	£9.69	£3.23
Rennie peppermint tablets	72	10	£5.29	£0.73
Rennie Orange tablets	48	16	£4.29	£1.43

Comparison of the largest pack size and maximum daily dose of the top 9 selling products (volume) for adult heartburn relief[2]. Duplicate flavours excluded. 10th product also excluded as there was no maximum dose. Formats other than tablets, capsules and liquids are excluded.

References: 1. PAGB OTC Directory. Available from https://www.otcdirectory.co.uk/ accessed 18/02/21. 2. Nielsen ScanTrack. Indigestion remedies, Total coverage MAT TY volume sales w/e 30.01.2021

Product information can be found on the next page

Product information:

Nexium Control 20 mg gastro-resistant tablets and hard capsules. Esomeprazole.

Indications: The short-term treatment of reflux symptoms (e.g. heartburn and acid regurgitation) in adults. Dosage: The recommended dose is 20 mg esomeprazole (one tablet or capsule) per day. It might be necessary to take the tablets or capsules for 2-3 consecutive days to achieve improvement of symptoms. The duration of treatment is up to 2 weeks. **Contraindications:** Hypersensitivity to the active substance, substituted benzimidazoles or to any of the excipients. Esomeprazole must not be used concomitantly with nelfinavir. **Warnings and precautions:** Patients should be instructed to consult a doctor if: They have significant unintentional weight loss, recurrent vomiting, dysphagia, haematemesis or melaena and when gastric ulcer is suspected or present, malignancy should be excluded as treatment with esomeprazole may alleviate symptoms and delay diagnosis. They have had previous gastric ulcer or gastrointestinal surgery. They have been on continuous symptomatic treatment of indigestion or heartburn for 4 or more weeks. They have jaundice or severe liver disease. They are aged over 55 years with new or recently changed symptoms. Patients with long-term recurrent symptoms of indigestion or heartburn should see their doctor at regular intervals. Patients over 55 years taking any non-prescription indigestion or heartburn remedy on a daily basis should inform their pharmacist or doctor. Patients should not take Nexium Control as a long term preventive medicinal product. Treatment with proton pump inhibitors (PPIs) may lead to a slightly increased risk of gastrointestinal infections such as *Salmonella* and *Campylobacter* and in hospitalised patients, also possibly *Clostridium difficile*. Patients should consult their doctor before taking this medicinal product if they are due to have an endoscopy or urea breath test. Co-administration of esomeprazole with atazanavir is not recommended. If the combination of atazanavir with a PPI is judged unavoidable, close clinical monitoring is recommended in combination with an increase in the dose of atazanavir to 400 mg with 100 mg of ritonavir. Esomeprazole 20 mg should not be exceeded. Esomeprazole is a CYP2C19 inhibitor. When starting or ending treatment with esomeprazole, the potential for interactions with medicinal products metabolised through CYP2C19 should be considered. An interaction is observed between clopidogrel and esomeprazole although the clinical relevance of this interaction is uncertain. The use of esomeprazole with clopidogrel should be discouraged. Patients should not take another PPI or H2 antagonist concomitantly. Increased Chromogranin A (CgA) level may interfere with investigations for neuroendocrine tumours. To avoid this interference, treatment should be stopped for at least 5 days before CgA measurements. If CgA and gastrin levels have not returned to reference range after initial measurement, measurements should be repeated 14 days after cessation of PPI treatment. Proton pump inhibitors are associated with very infrequent cases of subacute cutaneous lupus erythematosus (SCLE). If lesions occur, especially in sun-exposed areas of the skin, and if accompanied by arthralgia, the patient should seek medical help promptly and the health care professional should consider stopping Nexium Control. SCLE after previous treatment with a proton pump inhibitor may increase the risk of SCLE with other proton pump inhibitors. This medicinal product contains sugar spheres (sucrose). Patients with rare hereditary problems of fructose intolerance, glucose-galactose malabsorption or sucrase-isomaltase insufficiency should not take this medicinal product.

Side effects: See SPC for full details. Common: headache, abdominal pain, constipation, diarrhoea, flatulence, nausea/ vomiting, fundic gland polyps (benign). Uncommon: peripheral oedema, insomnia, dizziness, paraesthesia, somnolence, vertigo, dry mouth, increased liver enzymes, dermatitis, pruritus, rash urticaria. Rare: leukopenia, thrombocytopenia, hypersensitivity reactions e.g. fever, angioedema and anaphylactic reaction/shock, hyponatraemia, agitation, confusion, depression, taste disturbance, blurred vision, bronchospasm, stomatitis, gastrointestinal candidiasis, hepatitis with or without jaundice, alopecia, photosensitivity, arthralgia, myalgia, malaise, increased sweating. Very rare: agranulocytosis, pancytopenia, aggression, hallucinations, hepatic failure, hepatic encephalopathy in patients with pre-existing liver disease, erythema multiforme, Stevens-Johnson syndrome, toxic epidermal necrolysis (TEN), muscular weakness, interstitial nephritis, gynaecomastia. Not known: hypomagnesaemia; severe hypomagnesaemia can correlate with hypocalcaemia; hypomagnesaemia may also result in hypokalaemia, microscopic colitis, subacute cutaneous lupus erythematosus SCLE.

Legal category: GSL. **Product licence number:** PLGB 44673/0221 and PLGB 44673/0222. **MAH:** GlaxoSmithKline Consumer Healthcare (UK) Trading Limited, Brentford, TW8 9GS

RRP: Pack of 7 tablets RRP £6.99, pack of 14 tablets RRP £11.99. Pack of 14 capsules RRP £12.99. **The prices include VAT. Text prepared:** January 2021

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