



## Analysis of long-term therapeutic effects of cisapride and domperidone on functional dyspepsia

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### Abstract

**AIM:** To compare the long-term therapeutic effects of cisapride and domperidone Ddt on functional dyspepsia (FD).

**METHODS:** Randomly choosing 40 patients treated with cisapride and 32 patients treated with domperidone, of whom the symptoms of FD completely disappeared after the 4 wk treatment, respectively. And the symptoms of FD completely disappeared. In the cisapride group, 21 were men, 19 were women, aged 19-72 years, average age 38 years, their disease course ranged from 1 mo to 13 years, average 27 mo. Among them, 19 with dysmotility-like dyspepsia, 4 with gastroesophageal reflux-like dyspepsia, 10 with ulcer-like dyspepsia, 7 with complex dyspepsia. In the domperidone group 17 were men, 15 were women, age 19-74 years, average age 39 years, their disease course ranged from 1 mo to 14 years, average course 26 mo. Among them, 16 with dysmotility-like dyspepsia, 3 with gastroesophageal reflux-like dyspepsia, 9 with ulcer-like dyspepsia, 4 with complex dyspepsia. All of the patients were treated either with

cisapride (5 mg, twice per day) or domperidone (10 mg, twice per day) and maintained the treatment for 12 mo. During this period, observation was made of the recurrence of satiety, epigastric pain, epigastric distention, early satiety, nausea, vomiting, anorexia, belch which appeared after they had meals, and as well as side effects. The patients' symptoms were compared and analysed.

**RESULTS:** After 12 mo's treatment, epigastric pain recurred in 1 patient, respectively; in the cisapride group. Epigastric distention, early satiety. The recurrence rate was 7.5%. In the domperidone group, early satiety recurred in 3 patients, heartburn in 1, epigastric pain in 2, epigastric distention in 4. The recurrence rate was 31.2%, and the symptoms were more severe ( $P < 0.01$ ). Side effects: In the cisapride group, loose stool occurred in 1 patient, stool frequency increased in 1. The occurrence rate was 5.0%. In the domperidone group, loctorrhea, abnormal menstruation, agitation, drowsiness, loose stool and palpitation occurred in one patient, respectively. The occurrence rate was 18.7%.

**CONCLUSION:** Ddt cisapride has better therapeutic effects than domperidone, and it can significantly decrease the recurrence of functional dyspepsia.

**Key words:** Dyspepsia/drug therapy; Piperidines/therapeutic use; Domperidone/therapeutic use

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