



Current and Emerging Uses of Proton Pump Inhibitors
POSTTEST AND EVALUATION FORM
Use this page as your Fax Cover Sheet

Fax To: **212-274-8220**

From:

Pages: **Three (3), including cover**

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INSTRUCTIONS FOR CREDIT

1. Print all three pages:
 - 1) This cover page
 - 2) The following Posttest
 - 3) The following Evaluation Form
2. Complete the ten-question Posttest by circling the correct answers
3. Complete the evaluation form by circling your rating and writing your responses in the spaces provided
4. Fill out this cover page
5. Fax all three pages (including this cover page) to **212-274-8220**, or mail them to:
AGA CME Café
c/o Healthology
1333 Broadway, Suite 500
New York, NY 10018

*Your statement of credit will be emailed to you within three weeks. If you do not include an email address, we will mail your statement to you. Any questions about this program can be directed to agacmecafe@healthology.com.

POST-TEST: Current and Emerging Uses of Proton Pump Inhibitors

1. The efficacy of H₂ Receptor antagonists is limited because:
 - a. They just buffer the acid
 - b. They have a short half life
 - c. They affect only one of the secretory mechanisms
 - d. They have poor bioavailability
2. Proton pump inhibitors suppress acid secretion effectively because:
 - a. They inhibit gastrin
 - b. They are activated in the canalicular space
 - c. They block the final step in gastric acid secretion
 - d. They are delivered as prodrugs
3. Tachyphylaxis is a major issue in the protracted use of:
 - a. H₂ receptor antagonists
 - b. Prokinetics
 - c. Proton Pump Inhibitors
 - d. All of the above
4. Despite a short half-life, PPI action lasts over several hours because:
 - a. The turnover of the proton pump is slow
 - b. They are readily bioavailable
 - c. They have mild side effects
 - d. They are activated in situ
5. Proton Pump Inhibitors are a key component of *H. pylori* eradication therapy because:
 - a. They have a direct effect on the pathogen
 - b. They enhance the stability of the acid-labile antibiotics
 - c. They make the milieu less hospitable for the pathogen
 - d. All of the above
6. The activation of the PPI's is determined by
 - a. The pKa of the drug and the pH of the environment
 - b. The bioavailability of the drug
 - c. The potency of the drug
 - d. The drug-drug interactions
7. In NSAID (Non-Steroidal Anti-Inflammatory Drugs) induced ulcer diseases, successful acid control by PPI's allows the resumption of the NSAID:
True False
8. Significant gastroesophageal reflux disease (GERD) is effectively treated with PPI's because:
 - a. They do not lose efficacy over time
 - b. They have a benign side-effects profile
 - c. They control acid secretion efficiently
 - d. All of the above
9. The PPI test for non-cardiac chest pain:
 - a. Is a fast, effective and sensitive first-line approach to a patient for whom a cardiac etiology has been ruled out
 - b. Should be implemented only after pH monitoring
 - c. Requires esophageal motility testing
 - d. Has less than 50% specificity
10. The following upper respiratory symptoms may be manifestations of acid reflux:
 - a. Persistent hoarseness
 - b. Asthma
 - c. Laryngitis
 - d. All of the above

EVALUATION FORM: *Current and Emerging Uses of Proton Pump Inhibitors*

I. Using the following scale, please indicate how well the Learning Objectives were met:

1 = Not at all **2** = Partially **3** = To a large degree **4** = Completely

After reviewing the *Current and Emerging Uses of Proton Pump Inhibitors* module, I am able to:

- | | | | | |
|---|----------|----------|----------|----------|
| 1. Outline the medications currently used in the treatment of peptic ulcer diseases and reflux disease. | 1 | 2 | 3 | 4 |
| 2. Identify the mechanism of action for each class of agents used in the treatment of peptic ulcer diseases and reflux disease. | 1 | 2 | 3 | 4 |
| 3. Characterize the pharmacological profile of proton pump inhibitors. | 1 | 2 | 3 | 4 |
| 4. Discuss the state of the art pharmacological approach to Peptic Ulcer Disease, whether of bacterial origin (<i>H.pylori</i>) or induced by NSAID usage. | 1 | 2 | 3 | 4 |
| 5. Outline the state of the art medical options for the treatment of Gastroesophageal Reflex Disease (GERD), both erosive and non erosive. | 1 | 2 | 3 | 4 |
| 6. Discuss the medical options for the treatment of different extraesophageal manifestations of reflux diseases. | 1 | 2 | 3 | 4 |

II. Circle the number that reflects your opinion of the effectiveness of the monograph.

Strongly Disagree to Strongly Agree

- | | | | | | |
|---|----------|----------|----------|----------|----------|
| 1. The material was presented in clear and forthright language. | 1 | 2 | 3 | 4 | 5 |
| 2. The content was current. | 1 | 2 | 3 | 4 | 5 |
| 3. The content was relevant to the learner's needs. | 1 | 2 | 3 | 4 | 5 |
| 4. There was no perceived commercial bias, or the obvious appearance of skewed material which has been influenced by commercial support. | 1 | 2 | 3 | 4 | 5 |
| 5. If you disagree with statement # 4, please explain why: | | | | | |

III. To assist us in planning and improving future programs, please answer the following general questions about CME courses.

1. Please indicate how valuable you find the following types of learning formats

Least Valuable to Most Valuable

- | | | | | | |
|------------------------------|----------|----------|----------|----------|----------|
| CME on the Internet | 1 | 2 | 3 | 4 | 5 |
| Expert Panel | 1 | 2 | 3 | 4 | 5 |
| Interactive Teleconferencing | 1 | 2 | 3 | 4 | 5 |
| Journal-Based CME | 1 | 2 | 3 | 4 | 5 |
| Lecture | 1 | 2 | 3 | 4 | 5 |
| Lunch With Faculty | 1 | 2 | 3 | 4 | 5 |
| Monograph | 1 | 2 | 3 | 4 | 5 |
| Multimedia (on CD-ROM) | 1 | 2 | 3 | 4 | 5 |
| Problem-Based Learning | 1 | 2 | 3 | 4 | 5 |
| Question and Answer | 1 | 2 | 3 | 4 | 5 |
| Workshop | 1 | 2 | 3 | 4 | 5 |

2. Please list the topics you would like to have offered in future education programs:

3. How did you receive this multimedia CME module:

National Meeting AGA Website Mail Other: _____

IV. CME Request Form: To Request your CME credit, and to help the CME Committee interpret your answers, please supply this personal information:

1. First Name: _____ Last Name: _____ Degree/Suffix: _____

2. Fax: _____ Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

3. In which city/state/county do you practice? _____

4. To which of the following professional associations do you currently belong?

AGA ASGE ACG AASLD Other: _____

5. Are you: Male Female

6. What is your age: Under 30 30 39 40 49 50-59 Over 60

7. Is your primary practice arrangement (please mark 1 response):

Solo Practice GI Group Practice Multispecialty Industry
 Staff Model HMO Clinical research/academic Government Trainee

8. Specialty: _____ Years in Practice: _____

9. Please indicate how many hours you spent on this program (up to 1.5): _____