



FEATURE		ADVANTAGE	BENEFIT
Introduction in the world market	Omeprazole-1989 Pantoprazole- 1994 Rabeprazole- 1998 Esomeprazole- 2001	Latest PPI	Superior advantages
Maxpro consists only S-isomer of omeprazole whereas Omeprazole, Pantoprazole & Rabeprazole contain both R+S isomer		Only pure PPI	Ensures longer acid control and minimum side effects
Bioavailability	Maxpro-90%, Pantoprazole- 77% Rabeprazole-52% Omeprazole-30%	Offers more activity in small doses	Minimum side effects
Peak plasma concentration	Maxpro-1hr Omeprazole-2.5hrs Pantoprazole-2.5 hrs Rabeprazole- 3.5 hrs	Quick onset of action	Faster relief from hyperacidity
According to BNF 72, It is advised to avoid Pantoprazole & Rabeprazole in Pregnancy, whereas Esomeprazole can be given		Safest PPI during Pregnancy	No harm to embryo and fetus
Omeprazole has drug interaction with oral contraceptive but Esomeprazole is free of interaction		Can be taken with oral contraceptive concomitantly	Maintains contraceptive efficacy
Control intragastric pH>4 daily,	Maxpro-16-18 hrs Omeprazole-8-11 hrs Pantoprazole- 8-11 hrs Rabeprazole- 8-11 hrs	Longest time acid controlling power	Strongest PPI, offers prompt and prolong action
No drug interactions with NSAIDs		Can be taken with NSAIDs concomitantly	Safest PPI with NSAIDs
Only PPI esomeprazole gives double action when used with NSAIDs. It controls intragastric pH effectively and restore GI mucosal integrity. But other PPI only control intragastric pH.		Chance of Ulceration with NSAIDs Maxpro-0%, Omeprazole 4.7%, Pantoprazole 5%	No ulceration when used with NSAIDs