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## Acute dyspepsia

A Tools for Practice article<sup>1</sup> notes that the evidence for adding lidocaine or antispasmodics to antacids is insufficient for regular use in patients with acute dyspepsia (studied in emergency rooms). Evidence is inconsistent, with one study finding antacids alone better, another no added benefit, and a third (unblinded, older) showing lidocaine provided additional benefit.

They did suggest that patients (especially females) who present with new-onset dyspepsia should have cardiac diagnosis ruled out.

Reference:

1. Keeping it Simple for Emergency Room Dyspepsia. Tools for Practice #289 (2021) [View here](#)

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