

EMPIRICAL SECOND-LINE TREATMENTS IN EUROPE: DATA FROM 9,000 CASES FROM THE EUROPEAN REGISTRY ON HELICOBACTER PYLORI MANAGEMENT (HP-EUREG)

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Poster

Stomach & H. Pylori

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A prospective European registry of 8,901 patients found that empirical second-line H. pylori therapy achieved 82% overall effectiveness, with bismuth quadruple regimens prescribed for 14 days with high-dose PPIs exceeding 90% cure rates.

KEY POINTS

- Overall second-line empirical therapy effectiveness was 82% by both modified intention-to-treat and per-protocol analysis, with 96.5% patient compliance and adverse events in 19% of cases, most mild.
- Bismuth quadruple therapies with either tetracycline-metronidazole or clarithromycin-amoxicillin prescribed for 14 days with high-dose PPIs provided over 90% success rates.
- After first-line clarithromycin-containing therapy failure, optimised bismuth quadruple therapy with clarithromycin-amoxicillin achieved 92% cure rate, while amoxicillin-metronidazole achieved 91%.
- After failure of bismuth quadruple therapy, bismuth quadruple therapy with clarithromycin-amoxicillin achieved 95% to 95.5% cure rates depending on prior regimen format.
- The authors conclude that optimization of regimen selection, treatment duration, and PPI dosing is necessary after first-line therapy failure.

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