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Summary

SMOKING, ALCOHOL, AND ABDOMINAL OBESITY ARE POSITIVELY ASSOCIATED WITH GASTRIC CANCER RISK AFTER HELICOBACTER PYLORI ERADICATION: A NATIONWIDE POPULATION-BASED COHORT STUDY

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UEG Week Berlin 2025 | Poster

Oesophagus

October 6, 2025

Smoking, heavy alcohol consumption, and abdominal obesity are associated with increased gastric cancer risk after Helicobacter pylori eradication in a Korean population-based cohort study.

KEY POINTS

- Among 9,754 gastric cancer cases identified during 6.7 years median follow-up after H. pylori eradication, heavy smokers had 34% increased risk (aHR 1.34, 95% CI 1.27–1.42) with a dose-response relationship observed.
- Heavy drinkers (≥30g/day alcohol) had 23% increased gastric cancer risk (aHR 1.23, 95% CI 1.15–1.32) compared to non-drinkers.
- Abdominal obesity was associated with 11% increased gastric cancer risk (aHR 1.11, 95% CI 1.06–1.15) in the post-eradication period.
- Individuals aged 55 years or older were more affected by unhealthy lifestyles, and males showed stronger smoking-related risk than females (p-for-interaction 0.02).
- This Korean NHIS database study is relevant for clinicians managing patients after H. pylori eradication and for public health strategies targeting modifiable risk factors.

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