

ANTRUM INVOLVEMENT IN CORPUS ATROPHIC GASTRITIS MAY REGRESS AT LONG-TERM FOLLOW-UP IRRESPECTIVE OF *HELICOBACTER PYLORI*

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Poster

Oesophagus

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In a retrospective cohort of 117 corpus atrophic gastritis patients with baseline antral involvement followed for mean 40.6 months, nearly 25% showed complete antral healing and 21.4% of those with antral atrophy showed regression, occurring independently of *Helicobacter pylori* eradication status.

KEY POINTS

- At follow-up, 29 of 117 patients (24.8%) with antral involvement at baseline showed complete restitutio ad integrum of antral mucosa, and among 70 with baseline antral atrophy, 15 (21.4%) showed atrophy regression.
- Both antral healing and atrophy regression were similar in *Helicobacter pylori*-cured and not-cured or negative patients ($p>0.05$), with healing occurring also in patients without history of infection or eradication.
- At baseline, 27.3% had histologically diagnosed *Helicobacter pylori* infection (all received eradication), 53.8% were anti-parietal cell antibody positive, and 84.3% of those with atrophic gastritis had metaplasia.
- Worsening occurred in 8 patients (6.8%): 5 developed new antral atrophy and 3 with baseline atrophy developed intestinal metaplasia.
- Authors suggest these findings raise questions about using histology as the sole criterion for diagnosing autoimmune gastritis, given that antral involvement may regress independently of *Helicobacter pylori* status.

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