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Summary

ENDOSCOPIC FEATURES OF HELICOBACTER PYLORI INFECTION: DIFFERENCES BETWEEN PPI-USERS AND NO USERS

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Stomach & H. Pylori | Oesophagus

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Proton pump inhibitor use modifies the endoscopic features predictive of Helicobacter pylori infection, with fundic gland polyps losing reliability and hematin spots and diffuse redness emerging as markers of infection in PPI users.

KEY POINTS

- In 680 patients undergoing endoscopy, regular arrangement collecting venules (RAC) on the lesser curvature predicted H. pylori-negative status in non-PPI users (OR 0.05, 95% CI: 0.02–0.13, p<0.001) and RAC on the greater curvature predicted H. pylori-negative status in PPI users (OR 0.04, 95% CI: 0.01–0.23, p<0.001).
- Fundic gland polyps reliably predicted H. pylori-negative status in non-PPI users (OR 0.11, 95% CI: 0.03–0.53, p<0.001) but lost statistical significance in PPI users (OR 0.45, p=0.1), likely because PPI use increases FGP prevalence independent of H. pylori status.
- In PPI users, hematin spots (OR 20.7, 95% CI: 3.07–139.65, p<0.003) and diffuse redness (OR 13.8, 95% CI: 2.39–80.26, p<0.003) were significantly associated with H. pylori-positive status and may serve as key predictive features.
- The study included only endoscopically normal-appearing stomachs and evaluated soft mucosal features to guide biopsy decisions for H. pylori detection, aiming to reduce unnecessary tissue sampling.
- The presenter suggested that this model provides an additional decision-making tool for clinicians considering whether to perform biopsy for H. pylori in both PPI and non-PPI users.

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