KEVERPRAZAN-AMOXICILLIN VERSUS VONOPRAZAN-AMOXICILLIN DUAL THERAPY FOR HELICOBACTER PYLORI ERADICATION: A MULTICENTER, PROSPECTIVE, RANDOMIZED STUDY

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UEG Week Barcelona 2026 | Presentation

Stomach & H. Pylori | Oesophagus

October 19, 2026

A 14-day keverprazan-amoxicillin dual regimen was noninferior to vonoprazan-amoxicillin for initial H. pylori eradication in treatment-naive patients, achieving comparable eradication rates of approximately 90%.

KEY POINTS

- In this prospective multicenter randomized trial of 347 treatment-naive H. pylori patients, eradication rates were comparable between keverprazan-amoxicillin and vonoprazan-amoxicillin groups in both intention-to-treat analysis (89.7% vs 89.0%, P = 0.847) and per-protocol analysis (92.3% vs 92.2%, P = 0.975).
- The keverprazan-amoxicillin regimen demonstrated significantly lower incidence of nausea (2.9% vs 7.5%, P = 0.024) and diarrhea (2.3% vs 6.9%, P = 0.039) compared to vonoprazan-amoxicillin.
- Both regimens used the same dosing schedule: P-CAB 20 mg twice daily plus amoxicillin 1000 mg thrice daily for 14 days.
- Total adverse events and loss to follow-up rates were similar between the two groups, and the overall safety profiles were comparable.
- This is the first direct comparison demonstrating that keverprazan-amoxicillin dual therapy is an effective alternative to the established vonoprazan-amoxicillin regimen for initial H. pylori treatment.

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