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Summary

EFFECTIVENESS OF HELICOBACTER PYLORI ERADICATION TREATMENTS IN PRIMARY CARE: INSIGHTS FROM A NATIONAL REAL-WORLD COHORT

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Stomach & H. Pylori

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A Spanish real-world cohort study of 30,693 Primary Care patients found single-capsule bismuth quadruple therapy achieved the highest H. pylori eradication rate at 91%, followed by non-bismuth concomitant quadruple therapy at 88%.

KEY POINTS

- Single-capsule bismuth quadruple therapy (PPI plus bismuth, tetracycline, and metronidazole) demonstrated 91% eradication rate, significantly outperforming other regimens after adjusting for clinical factors including age, sex, obesity, peptic ulcer history, chronic kidney disease, and smoking status.
- Non-bismuth concomitant quadruple therapy (PPI plus clarithromycin, amoxicillin, and metronidazole) achieved 88% eradication, while triple therapies showed lower rates: PPI plus clarithromycin and amoxicillin at 70%, and PPI plus clarithromycin and metronidazole at 61%.
- The study analyzed 211,972 patients with recorded H. pylori infection treated between 2003 and 2023 using a Spanish Primary Care database, with effectiveness assessed by stool antigen or breath tests within 12 months post-treatment.
- Treatment effectiveness in Primary Care was consistent with outcomes reported in specialist Gastroenterology settings from the European Registry on H. pylori Management.

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