

THE INFLUENCE OF INDICATIONS FOR HELICOBACTER PYLORI INVESTIGATION ON PRESCRIPTIONS AND EFFECTIVENESS: EUROPEAN REGISTRY ON H. PYLORI MANAGEMENT (HP-EUREG)

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Poster

Stomach & H. Pylori

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Analysis of 53,636 treatment-naïve H. pylori patients from 34 European countries found that indications were inappropriate in 5.6% of cases, with treatment effectiveness varying by indication from 87% to 91% and bismuth quadruple therapies achieving optimal results in nearly all indications.

KEY POINTS

- Treatment effectiveness varied significantly by indication: duodenal ulcer (91%), gastric ulcer (90%), preneoplastic lesions (90%), dyspepsia with normal endoscopy (89%), GERD (88%), and non-investigated dyspepsia (87%).
- Bismuth quadruple therapies (both BMTc and CAB formulations) reached 90% effectiveness in almost all indications except GERD, with cure rates consistently described as optimal.
- Concomitant clarithromycin-amoxicillin-tinidazole/metronidazole therapy achieved 90% effectiveness except in non-investigated dyspepsia, while triple therapies showed suboptimal eradication rates in all indications with the exception of Lithuania.
- Therapeutic compliance was higher in patients with duodenal ulcer and preneoplastic lesions (98% and 99%), while adverse events were more frequent in patients treated for dyspepsia with normal endoscopy compared to duodenal ulcer.
- This registry study is relevant for gastroenterologists managing H. pylori infection and making decisions about treatment regimens based on clinical indication.

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