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Summary

PRESCRIPTION PATTERN OF PROBIOTICS AS AN ADJUVANT THERAPY FOR HELICOBACTER PYLORI ERADICATION: RESULTS OF THE EUROPEAN REGISTRY ON THE MANAGEMENT OF HELICOBACTER PYLORI INFECTION (HP-EUREG)

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UEG Week Copenhagen 2023 | Poster

Stomach & H. Pylori

October 15, 2023

A European registry study of 36,699 patients found that 22% received probiotics as adjuvants to Helicobacter pylori eradication therapy, with highly heterogeneous prescription patterns across countries and treatment regimens.

KEY POINTS

- Probiotic use was most frequent with sequential therapy (74%), hybrid therapy (38%), and dual therapy (33%), compared to lower rates with triple therapy (17%) and non-bismuth quadruple therapy (15%).
- Patients receiving probiotics had higher rates of antibiotic resistance to clarithromycin (11.4% vs 1.4%), metronidazole (10.7% vs 1.4%), and dual resistance (10.7% vs 1.4%).
- Probiotic prescription was more common in advanced treatment lines, with 46% use in sixth-line therapy and 28% in fifth-line therapy compared to 22% in first-line therapy.
- Geographic variation was substantial, with probiotic use ranging from 95% in Serbia to 0.2% in Slovenia, and the central European area showing the highest prescription rate at 83%.
- Multiple probiotic formulations were used including nine genera and 32 species, most commonly Saccharomyces boulardii, Lactobacillus rhamnosus, Bifidobacterium breve, Lactobacillus reuteri, and Lactobacillus acidophilus.

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