

ANTIBIOTIC SUSCEPTIBILITY PATTERNS AND CLARITHROMYCIN RESISTANCE DETERMINANTS IN *HELICOBACTER PYLORI* IN NORTHEAST OF SPAIN. A ONE-YEAR PROSPECTIVE STUDY

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UEG Week Copenhagen 2023

Poster

Stomach & H. Pylori

October 15, 2023

A Spanish tertiary hospital study of 641 gastric biopsies found 12% clarithromycin resistance in *H. pylori* isolates, with no tetracycline resistance and 17% resistance to both metronidazole and levofloxacin.

KEY POINTS

- Among 148 *H. pylori* isolates cultured from gastric biopsies between October 2021 and December 2022, clarithromycin resistance was 12%, below the 15% threshold that influences empirical treatment choice according to Maastricht VI guidelines.
- Most isolates (60.3%) were susceptible to all tested antibiotics, while metronidazole and levofloxacin each showed 17% resistance, amoxicillin 3.5%, and rifampicin 4.3%; no isolates were resistant to tetracycline.
- Co-resistance to two antibiotics occurred in 8.5% of isolates, most commonly levofloxacin plus clarithromycin; 2.8% showed triple resistance.
- The authors suggest their local resistance profile (clarithromycin below 15%, no tetracycline resistance) may support triple therapy with clarithromycin, amoxicillin and PPI or bismuth-containing quadruple therapy with tetracycline in their area.
- This study is relevant to gastroenterologists and infectious disease specialists developing regional *H. pylori* treatment protocols, emphasizing that empirical treatment should be guided by local resistance patterns.

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