

COMPARISON OF THE PREVENTIVE EFFECTS OF PROTON PUMP INHIBITORS AND VONOPRAZAN ON DELAYED BLEEDING AFTER GASTRIC ENDOSCOPIC SUBMUCOSAL DISSECTION

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Poster

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A retrospective propensity-matched study of 668 patients found no significant difference in delayed bleeding rates after gastric endoscopic submucosal dissection between combined intravenous and oral proton pump inhibitor therapy versus oral vonoprazan alone.

KEY POINTS

- Among 334 matched pairs of patients undergoing gastric ESD at Chiba University Hospital between 2017 and 2023, delayed bleeding rates were identical at 3.6% for both the PPI group (intravenous omeprazole followed by oral esomeprazole) and the oral vonoprazan group.
- Propensity score matching controlled for nine covariates associated with delayed bleeding risk, including anticoagulant and antiplatelet use, chronic kidney disease with hemodialysis, tumor size greater than 30 mm, lower-third tumor location, and presence of multiple tumors.
- Both treatment regimens administered acid suppression therapy for approximately 28 days following the procedure, with delayed bleeding defined as hemorrhage with clinical symptoms confirmed by emergency endoscopy within 28 days.
- The authors suggest that oral vonoprazan may be an important option for acid suppression after gastric ESD given its ease of administration, though they note that further prospective studies are needed to draw definitive conclusions.

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