

EFFECTIVENESS AND ADVERSE EVENTS OF HELICOBACTER PYLORI TREATMENT REGIMENS: AN ELEVEN-YEAR PROSPECTIVE COHORT STUDY

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Poster

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Concomitant and bismuth quadruple therapies achieved higher *Helicobacter pylori* eradication rates than triple therapy in a Portuguese cohort, though with more adverse events but similar adherence.

KEY POINTS

- Concomitant quadruple therapy eradication rate was 92.9% and bismuth quadruple therapy 90.4%, both significantly higher than triple therapy at 73.9% in 591 patients treated between 2013 and 2024.
- Adverse events were significantly more frequent with concomitant quadruple therapy (0.18%) and bismuth quadruple therapy (0.17%) compared to triple therapy (0.06%) and sequential quadruple therapy (0.02%).
- Overall treatment adherence was 97.1% with no significant difference among regimens.
- Prior eradication attempts, poor adherence, and absence of statin use were identified as predictive factors for treatment failure in logistic regression analysis.
- The study suggests quadruple therapies are more effective but associated with higher adverse event rates in this Portuguese population where *Helicobacter pylori* prevalence exceeds 60%.

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