EFFICACY AND SAFETY OF ANAPRAZOLE VERSUS RABEPRAZOLE IN EROSIVE ESOPHAGITIS (LOS ANGELES GRADES B-D): A MULTICENTER, RANDOMIZED, DOUBLE-BLIND, PHASE III NON-INFERIORITY TRIAL

Yiqi Du

UEG Week Barcelona 2026 | Presentation

Radiology & Imaging | Oesophagus | Immunology | Endoscopy | Digestive Oncology | Colorectal

October 20, 2026

Anaprazole 60 mg once daily was noninferior to rabeprazole 20 mg once daily for endoscopic healing at 8 weeks in adults with Los Angeles grade B-D erosive esophagitis.

KEY POINTS

- In this phase III trial of 500 patients with LA grade B-D erosive esophagitis (20% with grade C/D), cumulative healing rates at week 8 were 88.4% with anaprazole versus 84.6% with rabeprazole, demonstrating noninferiority with an adjusted risk difference of 3.8% (95% CI -2.3 to 10.0, margin -10%).
- Week-4 healing rates were 77.3% and 73.9% for anaprazole and rabeprazole, respectively.
- Treatment-emergent adverse events occurred in 49.4% of anaprazole-treated patients and 52.9% of rabeprazole-treated patients, with no treatment-related serious adverse events or deaths in either group.
- Improvements in reflux symptom frequency were comparable between groups, including overall reflux (90.3% vs 87.5%) and heartburn (92.6% vs 93.4%), as were reductions in GERD-HRQL scores.
- The trial prospectively required at least 20% of enrolled patients to have LA grade C or D disease to focus efficacy assessment on clinically meaningful mucosal injury.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/ac5c5ca8-d12d-11f1-bdfe-daaa6dbee0a2

AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.