





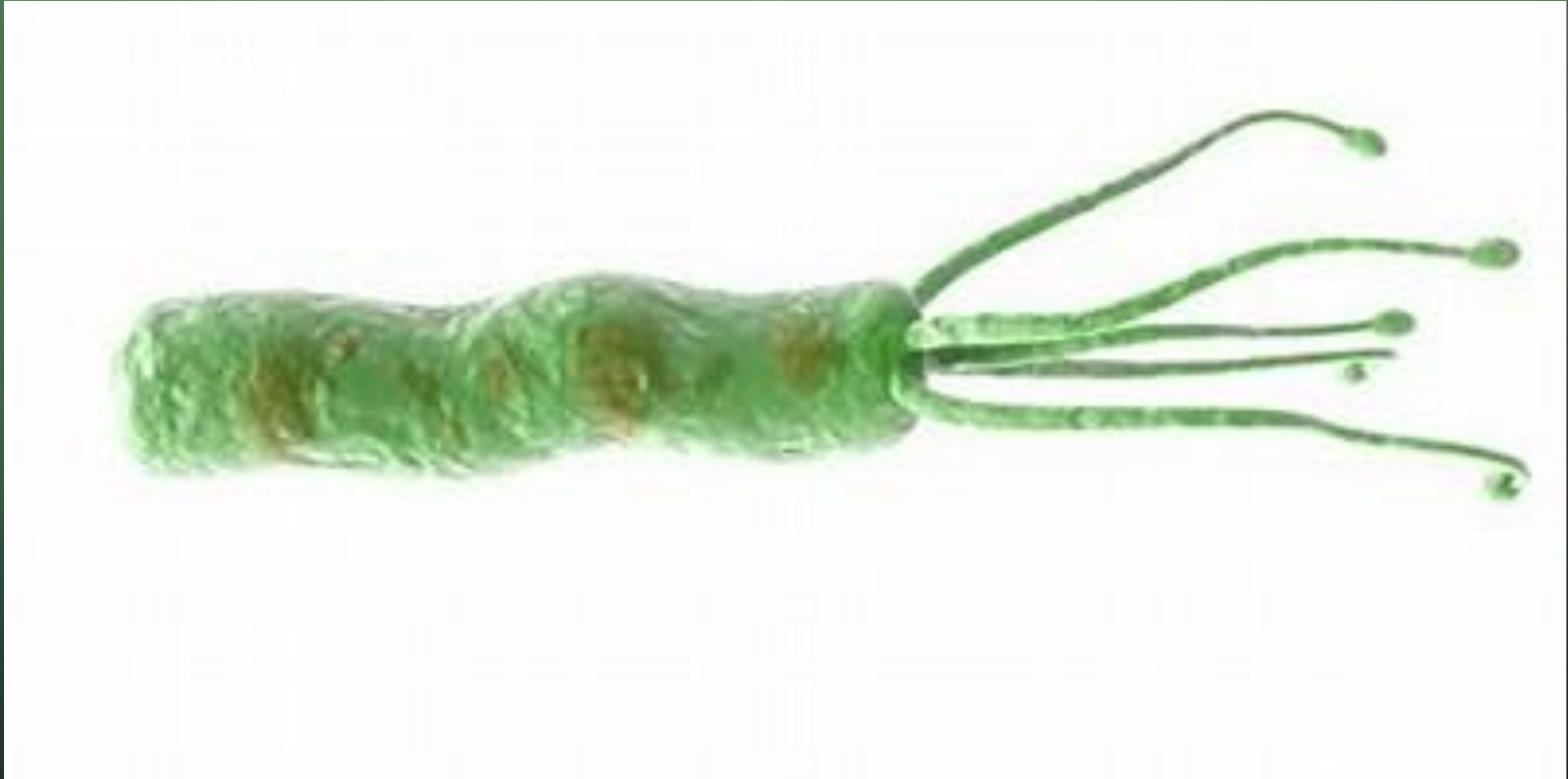
# HELICOBACTER PYLORI 2020

QUO VADIS?

JUAN T. TOMASINI MD

12 SEP 2020

# KILL THE UGLY BUG?







# TAKE HOME MESSAGE

## H. PYLORI ERADICATION 2020

Permanent cure for PEPTIC ULCER DISEASE

Use in CANCER PREVENTION is controversial

WHO – Class I carcinogen

AmJGastroenterol 2019;114:1827-183



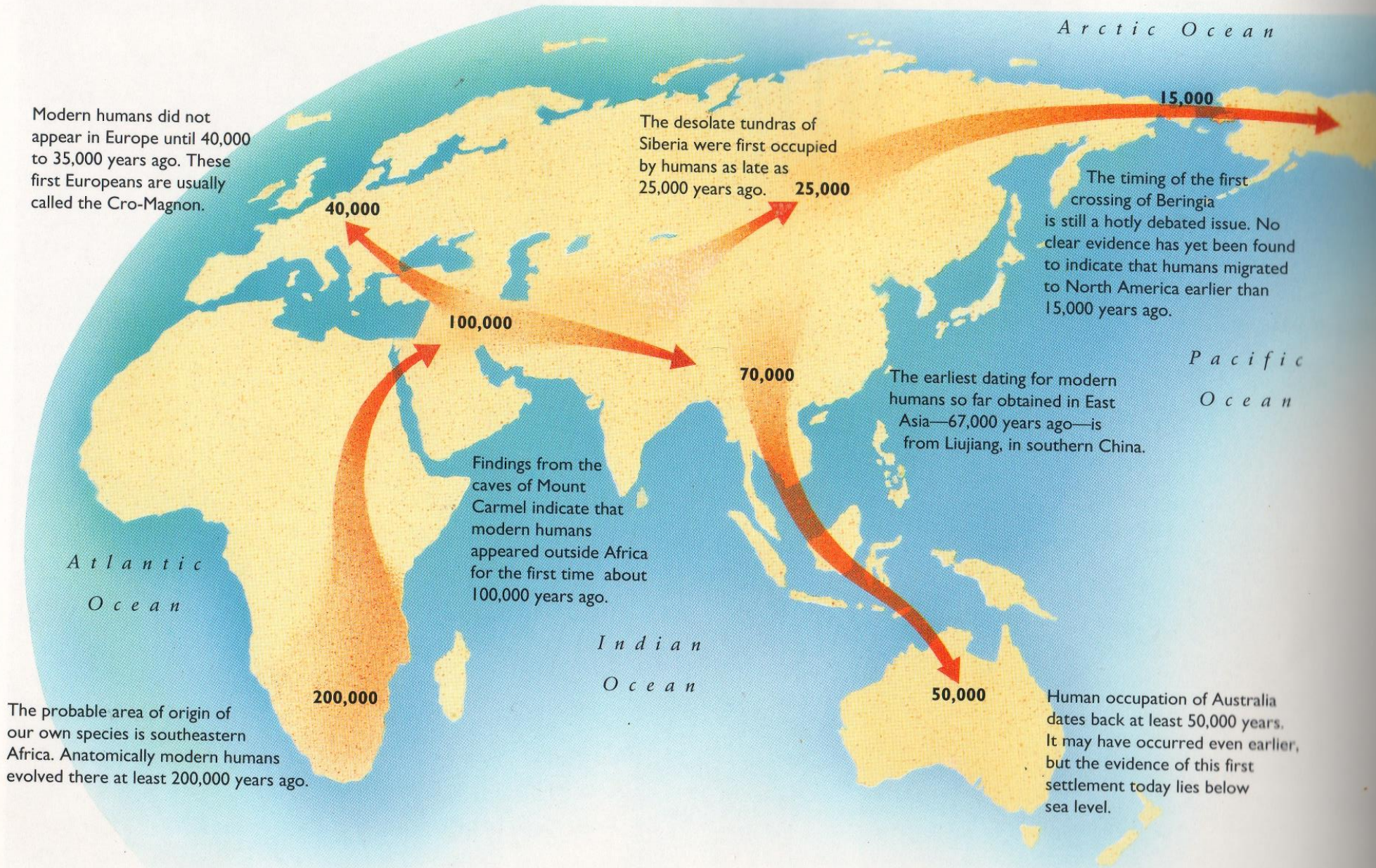
# ¿CANCERIGENO?

UN POQUITO PARA ATRAS POR FAVOR

Veamos la historia  
200,000 BC – 2020

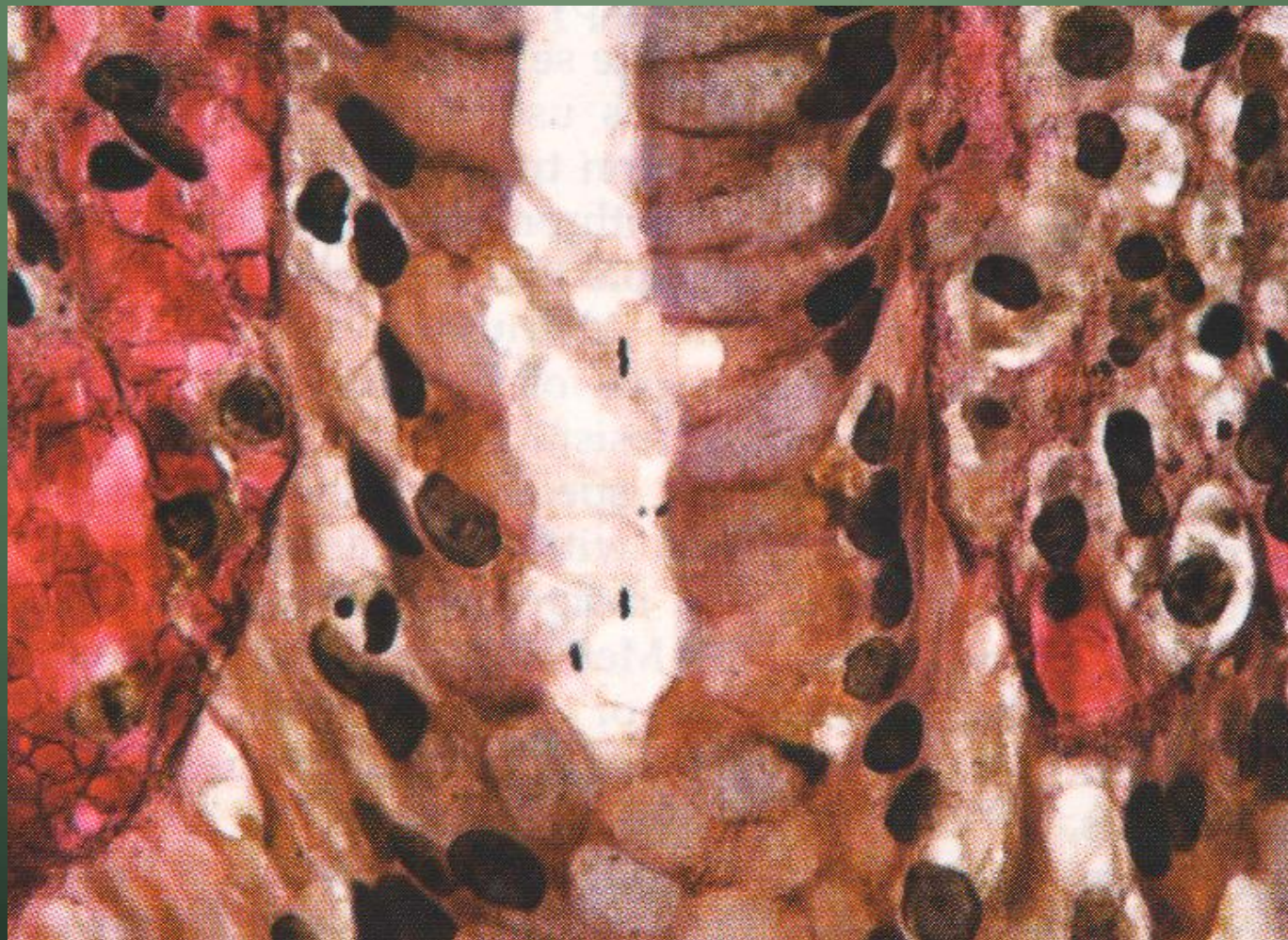


## Spreading Throughout the Globe





- 1983





# J.R. WARREN & B. MARSHAL

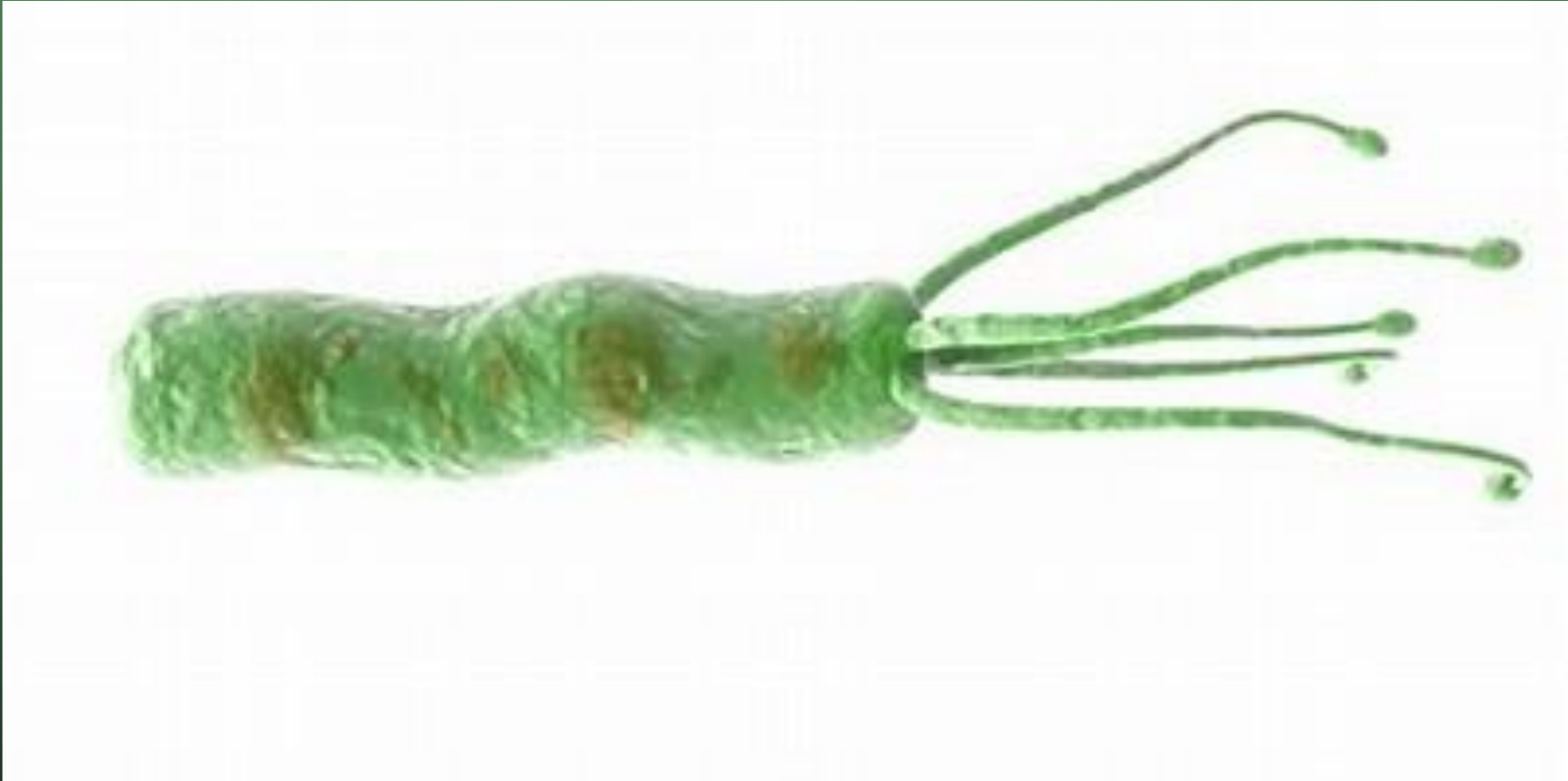
- Lancet 1983 1:273-5
- 2005 Nobel Prize

*“Opportunity only favors the trained mind”*

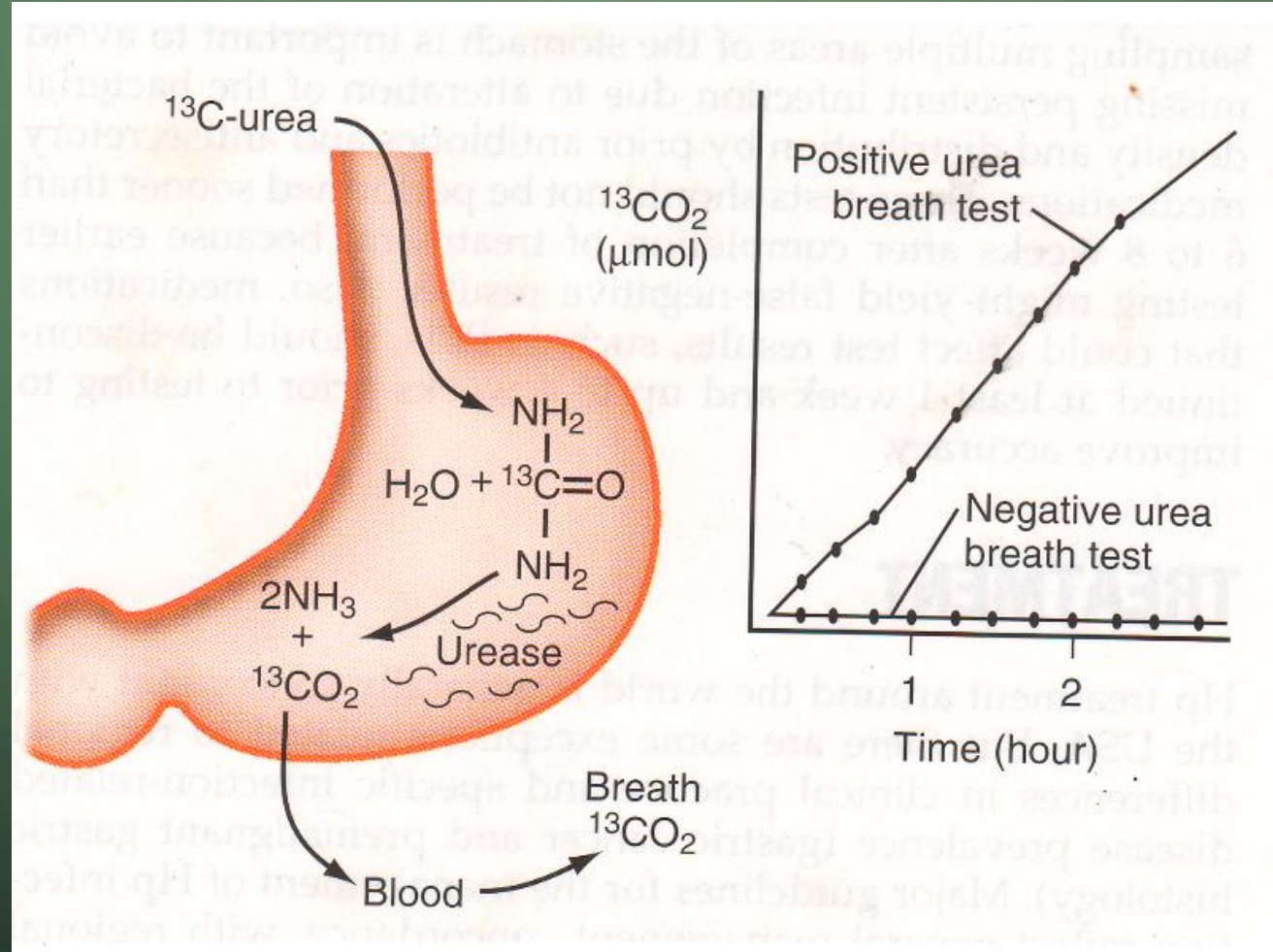
*- Louis Pasteur*

# H. PYLORI

## SURVIVAL ADAPTATION – MOTILITY

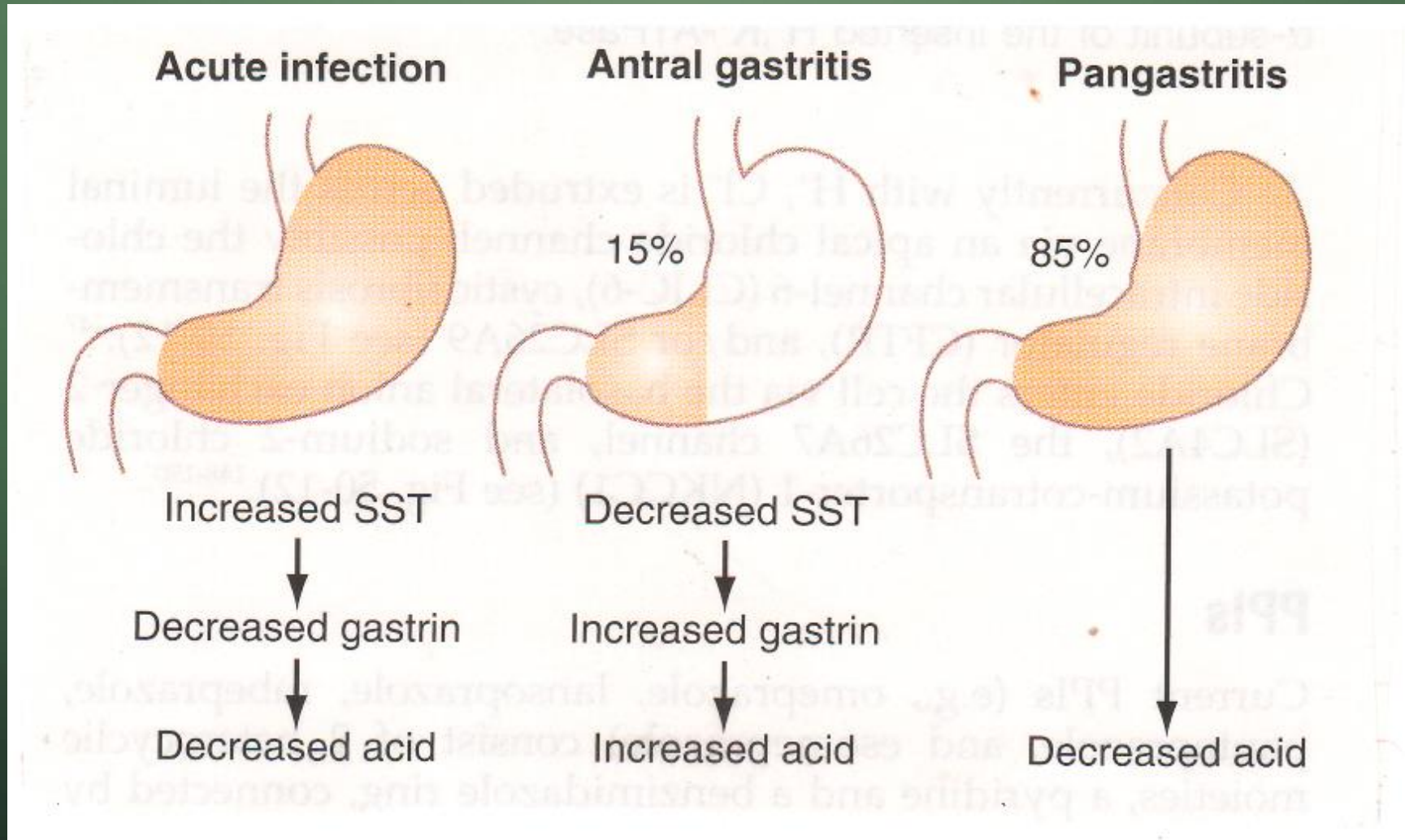


# SURVIVAL ADAPTATION – UREASE





# NATURAL HISTORY



# TREATMENT OF H. PYLORI INFECTION

## ACG CLINICAL GUIDELINE 2017

- Active PUD (gastric or duodenal)
- Confirmed history of PUD not previously treated for H. pylori
- Gastric MALT lymphoma (low grade)
- After endoscopic resection of Early Gastric Cancer
- Patients taking low-dose aspirin or starting therapy with NSAID
- Unexplained iron deficiency anemia
- Idiopathic thrombocytopenic purpura

# TREATMENT OF H. PYLORI INFECTION

## PRIMARY CARE

- Active PUD (gastric or duodenal)
- Confirmed history of PUD not previously treated for H. pylori
- Patients taking low-dose aspirin or starting therapy with NSAID

## SPECIALTY CARE

- Gastric MALT lymphoma (low grade)
- After endoscopic resection of Gastric Ca
- Unexplained iron deficiency anemia,
- ITP - Idiopathic Thrombocytopenic Purpura





# TREATMENT EVALUATION

The Best Test Nobody Uses  
Stool Antigen Test

# STOOL ANTIGEN TEST FOR H. PYLORI

- Affected by PPI & antibiotic use – Discontinue
- Useful before and after treatment
- A positive test confirms active infection
  - The bug is ALIVE
- A negative test post treatment confirms eradication
  - The bug is DEAD

# THE PROBLEM 2020

## **Antibiotic Resistance Is Affecting *H. pylori* Treatment**

Clarithromycin containing standard triple therapies are no longer suitable for unconditional empirical use.



A decorative graphic on the left side of the slide, consisting of a network of thin, light green lines and small circles, resembling a circuit board or a stylized tree structure.

# ¿QUÉ HAGO?

*“Amigo del Chase”*

# NEW TREATMENT

GRAHAM DY ET AL. ANN INTERN MED  
MAY 2020

- Rifabutin-based regimen – recently approved by the FDA for *H. pylori* treatment in adults
- Randomized treatment with capsules containing rifabutin, amoxicillin and omeprazole or capsules containing amoxicillin and omeprazole for 14 days

# RESULTS

- Therapy group - eradication rate 84%
- Comparison group - eradication rate 58%
- In patients with confirmed adherence to treatment, the eradication rates were 90% versus 65%, respectively
- No *H. pylori* resistance to rifabutin was detected and side effects were similar between groups



# OLDIES BUT GOODIES BISMUTH QUADRUPLE

- PPI – STANDARD DOSE
- BISMUTH 300mg TAB QID
- TETRACYCLINE 500mg QID
- METRONIDAZOLE 250mg TID / QID

# CANCER MASS SCREENING CRITERIA


- Major health problem
- Available effective therapy
- Available sensitive test
- Acceptable to patients
- Cost effective

¿PORQUE NO LOS  
VACUNAMOS?

Molto difficile







# SUSCEPTIBILITY PATTERN AND GENOTYPIC CHARACTERIZATION OF H. PYLORI ISOLATES FROM PR

105th American Society for Microbiology, Atlanta, Georgia

June 5-8, 2005

Lebrón RF, Vázquez GJ, Robledo IE.