ERADICATION OF HELICOBACTER PYLORI INFECTION. SIDE EFFECTS OF STANDARD TRIPLE THERAPY

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Introduction and purpose: To investigate the efficacy and drug-related side effects of a regimen that included proton pump inhibitors (PPIs), clarithromycin and amoxicillin in patients with Helicobacter pylori (Hp)-positive duodenal ulcer.

Material and methods. The study included 50 Hp-positive patients with duodenal ulcer. Hp infection was confirmed by a histological examination of samples obtained from the antrum and corpus of stomach during endoscopy and non-invasive Breath HELIK-Test. The eradication therapy consisted of 10-days twice daily oral administration of PPIs in standard dose, amoxicillin 1000 mg, clarithromycin 500 mg, then 20-days twice daily PPIs. Therapeutic success was confirmed by a negative histological examination and Breath HELIK-Test, performed 4-12 weeks after treatment.

Results. Before the treatment 82% of patients had pain syndrome and 70% - dyspeptic complaints. During the treatment in 50% of patients increased the frequency of dyspeptic complaints and in 42% of them such complaints appeared for the first time and continued during 1,5 months after treatment. The eradication rate was 70%. Healing of duodenal ulcer was noted in 82% cases. The level of basal pH was significantly (p <0,001) increased in the corpus of stomach from 1,39 \pm 0,41 to 1,83 \pm 0,31, in antrum 1,97 \pm 0,29 to 2,52 \pm 0.34 and in the duodenum from 4,09 \pm 0,59 to 5,14 \pm 0,95. After treatment significantly increased the levels of alanine transaminase from 36,78 \pm 0,78 to 42,52 \pm 1,22 IU/L , asparagines transaminase from 36,36 \pm 0,79 to 40, 76 \pm 1,27 IU/L, alkaline phosphatase from 96,90 \pm 1,37 to 101,24 \pm 2,17 IU/L, and triglycerides from 1,57 \pm 0,07 to 1,72 \pm 0.10 mmol/l, which must be noted as drug-related side effects of clarithromycin-based triple therapy. Increase of the levels of bilirubin from 19,41 \pm 0,24 to 20,88 \pm 0,34 mmol/l and cholesterol from 5,17 \pm 0,16 to 5,56 \pm 0,19 mmol/l were not statistically significant.

Conclusions. Standard triple Hp eradication therapy based on clarithromycin has low efficacy (70%), causes or increases the frequency of dyspeptic complaints associated with the use of antibiotics, has a hepatotoxic effect.









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