

World Journal of *Clinical Cases*

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“*Helicobacter pylori* treatment guideline: An Indian perspective”: Letter to the editor

Raktim Swarnakar, Shiv Lal Yadav

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Abstract

Treatment guidelines in many countries for *Helicobacter pylori* (*H. pylori*) may differ. Owing to the various characteristics of bacteria, clinical manifestations, resistance to antibiotics and recurrence rate, treatment regimens may change. In this letter, we would like to give an Indian perspective on *H. pylori* treatment guidelines.

Key Words: *Helicobacter pylori*; Guidelines; Antibiotics; India; Perspective; Infection

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Core Tip: A high prevalence of *Helicobacter pylori* (*H. pylori*) has been observed in many areas of India. There are recent guidelines and consensus on the management of *H. pylori* in India. We would like to correlate our guidelines with other existing guidelines through this letter-to-the-editor article.

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TO THE EDITOR

We read with interest the review article by Cho *et al*[1] where they have shown *Helicobacter pylori* (*H. pylori*) treatment guidelines in different countries. We would like to add views from India and the guidelines followed in India[2]. We hope this letter would be an insight into a better understanding of treatment regimens since the

prevalence of *H. pylori* is very high (nearly 80%) in the indigent populations of many developing countries[3].

Currently, the first line of management (low clarithromycin resistance) is the combination of proton pump inhibitors, amoxicillin and clarithromycin for 2 wk and in clarithromycin resistance areas, bismuth-based quadruple therapy is the first line of management. Imidazole-based therapy is not recommended for eradication. It is better to avoid less than 14 d of treatment. Fluoroquinolone-based concomitant therapy may be tried only after failure of second-line management[4]. The American College of Gastroenterology also has similar recommendations[5]. Considering salvage therapies which include standard triple therapy that has not been previously used, bismuth-based quadruple therapy, levofloxacin-based therapy or rifabutin-based triple therapy[2]. In India, antibiotic susceptibility testing-based therapy is considered an option as third-line rescue therapy though not compulsory. Furthermore, periodic monitoring of antimicrobial susceptibility patterns can provide general guidelines with the aim to eradicate *H. pylori*[6].

Unusually low prevalence of gastric cancer (GC) has been seen despite having a high prevalence of *H. pylori* in India owing to diet and genetic variations as seen in Indian patients[7]. This is the probable reason why routine *H. pylori* eradication to prevent GC in the Indian population is not recommended[2].

Resistance is the common cause of treatment failure and it depends upon the local variations of resistance. In India, as well in some other places, a high level of antimicrobial resistance and a high recurrence rate has been observed. That is why concomitant therapy is advisable more than sequential therapy in places with high antimicrobial resistance in India. Moreover, in India, multiple strains of *H. pylori* have been seen to infect a single host at the same time and reinfection chances are also high which differs from western countries.

It is important to collaborate research at the genetic level to find out the epidemiological cause of antimicrobial resistance, which mutation is causing such resistance and treatment failure. In developing and developed countries differences in epidemiological factors may contribute to the prevalence of resistant cases.

This review has nicely addressed the fact that there are differences in guidelines but it also needs to include many perspectives on guidelines from the developing and developed worlds, so that with more comprehensive precision medicine, we may develop in the future.

FOOTNOTES

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REFERENCES

- 1 **Cho JH**, Jin SY. Current guidelines for Helicobacter pylori treatment in East Asia 2022: Differences among China, Japan, and South Korea. *World J Clin Cases* 2022; **10**: 6349-6359 [DOI: [10.12998/wjcc.v10.i19.6349](https://doi.org/10.12998/wjcc.v10.i19.6349)]
- 2 **Singh SP**, Ahuja V, Ghoshal UC, Makharia G, Dutta U, Zargar SA, Venkataraman J, Dutta AK, Mukhopadhyay AK, Singh A, Thapa BR, Vaiphei K, Sathiyasekaran M, Sahu MK, Rout N, Abraham P, Dalai PC, Rathi P, Sinha SK, Bhatia S, Patra S, Ghoshal U, Poddar U, Mouli VP, Kate V. Management of Helicobacter pylori infection: The Bhubaneswar Consensus Report of the Indian Society of Gastroenterology. *Indian J Gastroenterol* 2021; **40**: 420-444 [PMID: [34219211](https://pubmed.ncbi.nlm.nih.gov/34219211/)] DOI: [10.1007/s12664-021-01186-4](https://doi.org/10.1007/s12664-021-01186-4)]
- 3 **Thirumurthi S**, Graham DY. Helicobacter pylori infection in India from a western perspective. *Indian J Med Res* 2012; **136**: 549-562 [PMID: [23168695](https://pubmed.ncbi.nlm.nih.gov/23168695/)]
- 4 **Marin AC**, Nyssen OP, McNicholl AG, Gisbert JP. Efficacy and Safety of Quinolone-Containing Rescue Therapies After the Failure of Non-Bismuth Quadruple Treatments for Helicobacter pylori Eradication: Systematic Review and Meta-

- Analysis. *Drugs* 2017; **77**: 765-776 [PMID: [28361211](#) DOI: [10.1007/s40265-017-0730-4](#)]
- 5 **Chey WD**, Leontiadis GI, Howden CW, Moss SF. ACG Clinical Guideline: Treatment of Helicobacter pylori Infection. *Am J Gastroenterol* 2017; **112**: 212-239 [PMID: [28071659](#) DOI: [10.1038/ajg.2016.563](#)]
 - 6 **Datta S**, Chattopadhyay S, Patra R, De R, Ramamurthy T, Hembram J, Chowdhury A, Bhattacharya SK, Berg DE, Nair GB, Mukhopadhyay AK. Most Helicobacter pylori strains of Kolkata in India are resistant to metronidazole but susceptible to other drugs commonly used for eradication and ulcer therapy. *Aliment Pharmacol Ther* 2005; **22**: 51-57 [PMID: [15963080](#) DOI: [10.1111/j.1365-2036.2005.02533.x](#)]
 - 7 **Misra V**, Pandey R, Misra SP, Dwivedi M. Helicobacter pylori and gastric cancer: Indian enigma. *World J Gastroenterol* 2014; **20**: 1503-1509 [PMID: [24587625](#) DOI: [10.3748/wjg.v20.i6.1503](#)]



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