



Appendix 26 - H-Pylori Eradication

Medications used in the Treatment of Helicobacter pylori Infection	
First line strategies:	(1) Clarithromycin triple: -PPI (standard or double dose) BID+Clarithromycin (500mg) BID+Amoxicillin (1 gm) TID OR Metronidazole (500 mg TID) for 14 days.
	(2) Bismuth quadruple: -PPI (standard dose) BID+Bismuth sub-citrate (120–300 mg) or subsalicylate (300 mg) QID+Tetracycline (500 mg) QID+Metronidazole (250–500 mg) QID (250) for 10-14 days.
	(3) Concomitant: PPI (standard dose) BID+Clarithromycin (500 mg) BID+Amoxicillin (1 gm) BID+Nitroimidazole (500 mg) BID Metronidazole or tinidazole. for10-14 days.
	(4) Sequential: PPI (standard dose) +Amoxicillin 1 G each BID for 5-7 days followed by -PPI BID+Clarithromycin (500 mg) BID +Nitroimidazole (500 mg) BID for5-7 days each.
	(5) Hybrid: -PPI (standard dose) +Amoxicillin (1 GM) BID for 7 days Followed by PPI+Amoxicillin 1G+Clarithromycin 500 mg + Nitroimidazole 500 mg each BID for 7 days each.
	(6) Levofloxacin triple: PPI (standard dose) BID+Levofloxacin (500 mg) QD+Amoxicillin 1G BID for10-14 days.
	(7) Levofloxacin sequential: -PPI (standard or double dose)+Amoxicillin 1G BID for 5-7 days followed by -PPI BID+Amoxicillin 1G BID+Levofloxacin (500 mg QD) + Nitroimidazole (500 mg) BID 5-7 days each.
Salvage therapies for H pylori infection:	(1) Bismuth quadruple : -PPI (standard dose) BID+Bismuth sub-citrate (120–300 mg) QID+Tetracycline (500 mg) QID+Metronidazole (500 mg) TID or QID for 14 days
	(2) Levofloxacin triple : - PPI (standard dose) BID+Levofloxacin (500 mg) QD+Amoxicillin 1G BID for 14 days .
	(3) Concomitant : -PPI (standard dose) BID+Clarithromycin (500 mg) BID+Amoxicillin I G BID+Nitroimidazole (500 mg) BID or TID for 10-14 days.
	(4) High-dose dual : -PPI (standard to double dose) TID or QID+Amoxicillin 1G TID or 750 mg TID or QID for 14 days
Step Therapy	(1) Patient is with <u>No</u> penicillin Allergy and <u>No</u> previous exposure to Macrolides: Recommended treatments: Bismuth quadruple or CONCOMITANT or Clarithromycin triple With amoxicillin. Other options: Sequential or HYBRID or Levofloxacin triple or Levofloxacin sequential.
	(2) Patient is with <u>No</u> penicillin Allergy and <u>with</u> previous exposure to Macrolides: Recommended treatments: Bismuth quadruple or Levofloxacin triple or Levofloxacin sequential. Other options: Concomitant therapy or Sequential therapy or Hybrid therapy.
	(3) Patient is <u>with</u> penicillin Allergy and <u>NO</u> previous exposure to Macrolides: Recommended treatments: Clarithromycin triple with metronidazole or Bismuth quadruple
	(4) Patient is <u>with</u> penicillin Allergy and <u>with</u> previous exposure to Macrolides: Recommended treatments: Bismuth quadruple