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ABSTRACTS



EPV220 – E-Poster Viewing

GASTROENTEROLOGY - GASTROENTEROLOGY OTHER (INCLUDING ENTEROPATHY; GI INFECTIONS; ESOPHAGEAL ATRESIA; GASTRITIS AND HELICOBACTER; POLYPOSIS)**QUADRUPLE THERAPY FOR HELICOBACTER PYLORI ERADICATION IN CHILDREN AND ADOLESCENTS WITH PEPTIC ULCERS AND/OR EROSIONS OF THE GASTRODUODENAL ZONE**

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Objectives and Study: Increasing antibiotic resistance leads to a decrease in the effectiveness of traditional *Helicobacter pylori* (Hp) eradication regimens. This problem is especially relevant in Ukraine (population-wide resistance to CLA is 17-22%). Objective: to evaluate the effectiveness of quadruple therapy regimens PPI + A + M+Bi of different duration and dosage and to analyze compliance in the treatment of HP-associated ulcers and/or erosions in children living in the frontline area.

Methods: 85 school-age children (mean age 13.7 ± 2.42 years) with Hp-associated erosions and ulcers were observed. Hp infection diagnosed by biopsy and/or antigenic stool test before and after eradication. All patients prescribed basic quadruple therapy PPI + A + M+Bi according to ESPGHAN 2016, 2023 recommendations and divided into 3 groups. Group 1 (25 people) - quadruple therapy in a standard dose for 10 days, group 2 (30 people) - PPI + A (in high doses)+M+Bi for 10 days, group 3 (30 people) - PPI + A + M+Bi in a standard dose for 14 days. Patients filled out the corresponding ESPGHAN flyers, which analyzed during and after the treatment. The results were statistically processed.

Results: The effectiveness of quadruple therapy in patients in group 1 was 76%. Side effects (nausea, diarrhea, allergic reactions) were minimal in 2 patients (8%), compliance was maximum (100%). The effectiveness of eradication in patients in group 2 was 93.3%, side effects in 5 patients (16.7%), there were no refusals from therapy, compliance was high. The effectiveness of eradication in group 3 was 83.3%, side effects in 6 children (20%) and the largest number (12!) of violations of recommendations up to self-termination of treatment, compliance was low. It was the failure to comply with recommendations that negatively affected the effectiveness of eradication.

Conclusions: Quadruple therapy PPI + A + M+Bi (with high dose PPI + A) for 10 days is optimal and effective for the treatment of Hp in children with high CLA resistance and in adverse war conditions.

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