

# PPI-gastric cancer link remains after H. pylori eradication

November 2 2017

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(HealthDay)—Long-term proton pump inhibitor (PPI) use is associated

with increased risk of gastric cancer (GC) even after *Helicobacter pylori* (HP) eradication therapy, according to a study published online Oct. 31 in *Gut*.

Ka Shing Cheung, from the University of Hong Kong, and colleagues examined the correlation between PPI use and GC among HP-infected subjects who had received HP [therapy](#). A total of 63,397 eligible subjects who had received an outpatient prescription of clarithromycin-based triple therapy between 2003 and 2012 were enrolled.

The researchers found that 0.24 percent of the subjects developed GC during a median follow-up of 7.6 years. PPI use was correlated with elevated risk of GC (hazard ratio, 2.44; 95 percent confidence interval, 1.42 to 4.2), while histamine-2 receptor antagonist use was not associated with increased risk (hazard ratio, 0.72; 95 percent confidence interval, 0.48 to 1.07). Duration of PPI use was correlated with increased risk (for  $\geq$ one,  $\geq$ two, and  $\geq$ three years, the hazard ratios were 5.04 [95 percent confidence interval, 1.23 to 20.61], 6.65 [95 percent confidence interval, 1.62 to 27.26], and 8.34 [95 percent confidence interval, 2.02 to 34.41], respectively). PPI versus non-PPI use was correlated with an adjusted absolute risk difference of 4.29 excess GCs per 10,000 person-years (95 percent [confidence](#) interval, 1.25 to 9.54)

"Long-term use of PPIs was still associated with an increased GC risk in subjects even after HP eradication therapy," the authors write.

One author disclosed ties to the pharmaceutical industry.

**More information:** [Abstract/Full Text \(subscription or payment may be required\)](#)

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Citation: PPI-gastric cancer link remains after H. pylori eradication (2017, November 2)  
retrieved 18 April 2024 from

<https://medicalxpress.com/news/2017-11-ppi-gastric-cancer-link-pylori-eradication.html>

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