

H. pylori eradication cuts gastric cancer risk in those with family history

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group in whom gastric cancer developed had persistent *H. pylori* infection. Gastric cancer developed in 0.8 and 2.9 percent of the participants in whom *H. pylori* infection was eradicated and in those with persistent infection, respectively (hazard ratio, 0.27). Adverse events were mild and occurred more often in the treatment group (53.0 versus 19.1 percent).

"The results of the current trial, along with those of our previous trial, showed that the risk of [gastric cancer](#) among participants in whom infection was not eradicated was similar in the treatment group and in the placebo group," the authors write.

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(HealthDay)—Among those who have *Helicobacter pylori* infection and a family history of gastric cancer in first-degree relatives, eradication treatment for *H. pylori* reduces the risk for gastric cancer, according to a study published in the Jan. 30 issue of the *New England Journal of Medicine*.

Il Ju Choi, M.D., Ph.D., from the National Cancer Center in Goyang, South Korea, and colleagues conducted a trial involving 1,838 first-degree relatives of patients with gastric cancer with *H. pylori* infection who were randomly assigned to receive either eradication therapy (lansoprazole, amoxicillin, and clarithromycin) or placebo. The modified intention-to-treat population included 1,676 participants (832 in the treatment group and 844 in the placebo group).

The researchers found that gastric cancer developed in 1.2 and 2.7 percent of participants in the treatment and placebo groups, respectively, during a median follow-up of 9.2 years (hazard ratio, 0.45). Five of the 10 patients in the treatment

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