Why carry out this study?

- High-dose intravenous esomeprazole is the only approved pharmacological treatment for the prevention of peptic ulcer rebleeding (currently approved in more than 100 countries worldwide), but has not yet been approved in China.
- This phase 3, multicenter, randomized trial aimed to evaluate a high-dose intravenous esomeprazole regimen versus an active control (cimetidine) for the prevention of rebleeding in Chinese patients with a high risk of peptic ulcer rebleeding who had undergone primary endoscopic hemostatic treatment.

What was learned from the study?

- The rate of clinically significant rebleeding within 72 hours was low overall (3.3%) and numerically lower in patients treated with esomeprazole compared with cimetidine (0.9% vs. 5.6%); all treatments were well tolerated.
- Esomeprazole showed a numerical trend towards superior clinical benefit over cimetidine in the prevention of rebleeding in Chinese patients who had successfully undergone initial hemostatic therapy of a bleeding peptic ulcer, with a similar safety and tolerability profile; this suggests that esomeprazole may be an alternative treatment option to cimetidine for this indication in China.

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