Reviewer’s report

Title: Efficacy of Helicobacter pylori eradication therapies: a single centre observational study

Authors:

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Reviewer: Dr Xavier Calvet

Level of interest: A paper of limited interest

Advice on publication: Accept after revision, which I do not need to see

1. General comments: The article is a retrospective review of a large, single Hospital, series of patients who received eradication therapy. It is well written and pleasant to read. I have only minor suggestions for improvement.

2. According to Maastricht guidelines for studies on Helicobacter pylori cited by the author, the analysis performed in the study (that included only the patients that completed follow-up) should be labelled as "per protocol analysis" instead of "intention to treat analysis" (page 8 paragraph 2).

3. The differences observed between different first line therapies are not in accordance with current knowledge. Many studies have reported a low effectiveness of proton pump inhibitor (PPI)-based triple therapy in clinical practice and results of the study referring to PPI triple therapies are, therefore, plausible. By contrast the efficacy reported by Dr. Beales with the combination of ranitidine bismuth citrate (RBC), amoxicillin and clarithromycin is noticeably high. As the study performs a non-randomized and retrospective analysis, other factors different of intrinsic efficacy of treatment may perhaps explain the remarkable difference between RBC and PPI based treatments. In this sense it will be important to know if patients in both groups were similar according to the presence of previous ulcer complication, baseline diagnostic of ulcer or non-ulcer dyspepsia, the conditions of application of therapy (primary vs. hospital care) and the number and speciality of the practitioners that prescribed therapy. In any case, conclusions should be moderated and the abovementioned topics discussed.

4. In my knowledge, this paper provides the first evidence supporting the recommendations of de Boer et al, (BMJ, 2000) of avoiding the combination of clarithromycin and metronidazole in first line therapy. This finding is important and should be further stressed in the abstract, results and discussion.

Competing interests:

I have received occasional funding from Astra-Zeneca, Pharmacia-Upjorn, and Janssen between other proton pump inhibitor manufacturers, as well as from ranitidine bismuth citrate manufacturer, Glaxo-Wellcome.