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EDITED BY
Valério Monteiro-Neto,
Federal University of Maranhão, Brazil

REVIEWED BY

Qian Haisheng,
The First Affiliated Hospital of Nanjing Medical
University, China

*CORRESPONDENCE
Alejandro Chen Liang

☑ alex95chenliang@gmail.com

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Commentary: Efficacy and safety of vonoprazan-amoxicillin dual therapy versus bismuth-containing quadruple therapy for patients with Helicobacter pylori infection: a meta-analysis

Alejandro Chen Liang ^{1*}, Yeison Cruz Castillo ² and Salma Alejandra Beltrán Covarrubias ^{3,4}

¹Centro de Estudios Universitarios Xochicalco Campus Tijuana, Tijuana, Mexico, ²Universidad Autónoma de Santo Domingo, Santo Domingo, Dominica, ³Universidad de Guadalajara, Guadalajara, Mexico, ⁴Centro Universitario de Ciencias de la Salud, Guadalajara, Mexico

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A Commentary on

Efficacy and safety of vonoprazan-amoxicillin dual therapy versus bismuth-containing quadruple therapy for patients with *Helicobacter pylori* infection: a meta-analysis

by Li, X., Jiang, C., Su, Y., Gao, R., Yang, P., Qin, Y., Zou, Y., Liang, W., Quan, J., and Pan, L. (2025). *Front. Microbiol.* 16:1561749. doi: 10.3389/fmicb.2025.1561749

We read with interest the meta-analysis by Li et al. (2025), comparing vonoprazan-amoxicillin (VA) dual therapy with bismuth-based therapy (BQT) for *Helicobacter pylori* (*H. pylori*) eradication. We congratulate the authors on their timely and well-conducted study addressing a clinically relevant question in *H. pylori* management, which was designed to compare the efficacy and safety of VA dual therapy with BQT across randomized controlled trials (RCT). We acknowledge the authors for their effort in performing a comprehensive systematic review and meta-analysis on an important clinical topic.

We would like to respectfully raise a methodological consideration. Some included studies had BQT arms in which vonoprazan (VPZ) was used instead of a proton pump inhibitor (PPI) in the control group, such as the RCT by Ratana-Amornpin et al. (2023), and Gaozhong and Qing (1974), Because VPZ does not require an acidic environment for activation, it provides a stronger and more sustained acid suppression, resulting in faster symptom control compared to PPIs (Agago et al., 2024). Moreover, in a metanalysis by Simadibrata et al. (2022), comparing potassium- competitive acid blockers (PCABs), the drug class to which VPZ belongs, the H. pylori eradication rate was significantly higher with PCABs compared to PPIs. Therefore, including these studies

Chen Liang et al. 10.3389/fmicb.2025.1733070

may introduce heterogeneity, affect comparability and shadow a true effect. Notably, Table 1 in the data extraction reports a PPI rather than VPZ, which contradicts the original publication. This inconsistency may misrepresent the study and should be corrected to ensure accurate reporting.

Regarding study selection, including certain trials from the chosen databases may result in a sample that is not fully homogeneous, as some studies do not entirely meet the inclusion criteria. Highlighting these points emphasizes methodological transparency and helps strengthen the reliability and interpretability of the conclusions. Careful screening and verification of eligibility at multiple stages could have prevented such errors, underscoring the importance of rigorous selection processes. Following the PRISMA guidelines from the outset would have facilitated standardized documentation of inclusion and exclusion steps, improved reproducibility and minimizing methodological bias. This approach aligns with the recommendations of Calderon Martinez et al. (2025), in a Comprehensive Guideline to Conduct a Systematic Review and Meta-Analysis in Medical Research, which underscore the importance of using a well-defined PICO framework and carefully identifying appropriate studies to minimize bias and ensure robust evidence synthesis.

Finally, the review did not specify which types of quadruple therapy were included. In China, quadruple therapy can combine different antibiotics with either a PPI or VPZ, and it is important to clarify which combinations were considered. Providing this detail would enhance transparency and allow for a more precise comparison of the included studies. Highlighting these points aims to support methodological rigor and strengthen the reliability of the conclusions.

Our aim is to provide a constructive contribution to the discussion on optimal *H. pylori* management and to ensure the meta-analysis conclusions are based on accurate data.

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YC: Conceptualization, Data curation, Formal analysis, Funding acquisition, Investigation, Methodology, Project administration, Resources, Software, Supervision, Validation, Visualization, Writing – original draft, Writing – review & editing. SB: Conceptualization, Data curation, Formal analysis, Funding acquisition, Investigation, Methodology, Project administration, Resources, Software, Supervision, Validation, Visualization, Writing – original draft, Writing – review & editing.

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References

Agago, D. E., Hanif, N., Ajay Kumar, A. S., Arsalan, M., Kaur Dhanjal, M., Hanif, L., et al. (2024). Comparison of potassium-competitive acid blockers and proton pump inhibitors in patients with gastroesophageal reflux disease: a systematic review and meta-analysis of randomized controlled trials. *Cureus* 16:e65141. doi: 10.7759/cureus.65141

Calderon Martinez, E., Ghattas Hasbun, P. E., Salolin Vargas, V. P., García-González, O. Y., Fermin Madera, M. D., Rueda Capistrán, D. E., et al. (2025). A comprehensive guide to conduct a systematic review and meta-analysis in medical research. *Medicine* 104:e41868. doi: 10.1097/MD.0000000000041868

Gaozhong, L. I., and Qing, J. I. A. C. J. (1974). Studies on the eradication of *Helicobacter pylori* in dual therapy based on vonoprazan and high-dose amoxicillin and classical four-combination. 61, 125–128.

Li, X., Jiang, C., Su, Y., Gao, R., Yang, P., Qin, Y., et al. (2025). Efficacy and safety of vonoprazan-amoxicillin dual therapy versus bismuth-containing quadruple therapy for patients with Helicobacter pylori infection: a meta-analysis. *Front. Microbiol.* 16:1561749. doi: 10.3389/fmicb.2025.1561749

Ratana-Amornpin, S., Sanglutong, L., Eiamsitrakoon, T., Siramolpiwat, S., Graham, D. Y., and Mahachai, V. (2023). Pilot studies of vonoprazan-containing Helicobacter pylori eradication therapy suggest Thailand may be more similar to the US than Japan. *Helicobacter* 28, 1–7. doi: 10.1111/hel.13019

Simadibrata, D. M., Syam, A. F., and Lee, Y. Y. (2022). Meta-analysis: a comparison of efficacy and safety of potassium-competitive acid blocker and proton pump inhibitor in gastric acid-related diseases: a systematic review and meta-analysis. *J. Gastroenterol. Hepatol.* 37, 2217–2228. doi: 10.1111/jgh.16017