

Effect of proton pump inhibitor use on *Helicobacter pylori* positivity and atrial fibrillation

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Dear editor

We read with interest the report by Wang et al regarding the association between *Helicobacter pylori* infection and atrial fibrillation.¹ One of our concerns about this well designed study is the lack of reporting of proton pump inhibitor (PPI) use in the patients and controls. It is well known that use of PPIs influences the results of some tests for *H. pylori*, including the urea breath test, which the authors used in their study. Notably, the frequency of *H. pylori* antibody positivity was similar between all three groups while *H. pylori* infection seems to be significantly more common in subjects with long-standing atrial fibrillation. More frequent use of PPIs may potentially explain the lower frequency of *H. pylori* positivity in the control group and short-term atrial fibrillation group. Further, there are some recent reports indicating a protective effect of PPIs on the risk of atrial fibrillation, especially in people with gastroesophageal reflux disease.² In conclusion, use of PPIs may have influenced some of the test results in this study, including the risk of atrial fibrillation.

Disclosure

The authors have no conflicts of interest to disclose in relation to this communication.

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Dear editor

We are very glad to respond to the enquiry from Kadri Atay and Omer Kaya about use of PPIs in our subject. This study was a retrospective, cross-sectional analysis from a single center, and patients with gastrointestinal disease and those on PPI therapy before recruitment were excluded from the study.

Disclosure

The authors report no conflicts of interest in this communication.

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