

Clinical Treatment of Gastroenterology in Patients with Chronic Atrophic Gastritis

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Abstract: Objective: To observe the clinical manifestations of selected patients with chronic atrophic gastritis, and to collect data to explore the clinical treatment effect of tepredone in the Department of Gastroenterology in patients with chronic atrophic gastritis. Methods: A total of 160 patients with chronic atrophic gastritis were selected among the patients admitted to the hospital for treatment from August 2019 to August 2022, and a total of 160 patients were selected as the experimental subjects of this clinical treatment study of gastroenterology in patients with chronic atrophic gastritis. 160 patients with chronic atrophic gastritis will be randomly divided into two groups, 80 cases in each group, to ensure that the difference between the study group and the control group is statistically significant to ensure the availability of experimental data. In the experiment, 80 patients with chronic atrophic gastritis in the control group received triple therapy with conventional treatment in gastroenterology, while 80 patients with chronic atrophic gastritis in the study group added tipredone therapy to the triple therapy of conventional treatment in gastroenterology. A two-week treatment cycle compares the effects of treatment between the study and control groups, collects data and draws corresponding conclusions. Results: After treatment, the total effective rate of treatment in the study group was 97.5%, which was higher than that in the control group, and the difference was statistically significant. Conclusion: In patients with chronic atrophic gastritis, on the basis of conventional treatment in gastroenterology, the addition of tepredone therapy has positive significance for the treatment effect of chronic atrophic gastritis, and can be promoted.

Keywords: Chronic Atrophic Gastritis; Gastroenterology; Tepredone

Introduction

Chronic atrophic gastritis is a common digestive system disease, which can be affected by a variety of factors, such as *Helicobacter pylori* infection, immune factors, constitution, genetics, etc., easy to aggravate the condition due to overeating, alcoholism and other bad living habits, more common in middle-aged and elderly people. The disease is not specific, and the clinical symptoms and lesion range are inconsistent. Diagnosis requires gastroscopy, gastric mucosal examination, or histopathology. Chronic atrophic gastritis is a common form of inflammatory disease of the stomach. Patients with such diseases have gastrointestinal side effects (nausea, abdominal discomfort, etc.) due to abnormal gastric function, and may also have complications such as gastric bleeding and gastric ulcers, and the incidence and recurrence rate are high. In clinical treatment, it is a type of disease with a long treatment period and a relatively painful course. If left untreated, it will not only affect the patient's health and quality of life, but also become cancerous and life-threatening.

At present, the treatment of chronic atrophic gastritis mainly relies on drug treatment, but the treatment effect has not been significantly improved, so it needs to be improved on the basis of traditional drug therapy, and this study has achieved certain positive results on the basis of the triple therapy of conventional treatment in gastroenterology

1. Object and method

1.1 Basic information

A total of 160 patients with chronic atrophic gastritis were selected from the Department of Gastroenterology of our hospital from August 2019 to August 2022 as the experimental subjects of this clinical treatment study of gastroenterology in patients with chronic atrophic gastritis. 160 patients with chronic atrophic gastritis will be randomly divided into two groups, 80 patients in each group, and the difference between the two groups is not statistically significant ($P>0.05$), which is comparable to ensure the availability of experimental data.

The study was approved by the institutional ethics committee and all patients were informed of the study. All patients in the study were diagnosed by gastroscopy, and patients with contraindications to medication, organic lesions, and language disorders were excluded.

1.2 Method

In the experiment, 80 patients with chronic atrophic gastritis in the control group were treated with triple therapy (4 g of pectin bismuth + 1000 mg of amoxicillin + 500 mg of clarithromycin orally once daily) with a two-week treatment cycle.

The 80 patients with chronic atrophic gastritis in the study group need to be distinguished from the control group, and after the usual treatment of triple therapy (4 g pectin bismuth + 1000mg amoxicillin + 500 mg clarithromycin orally once daily) is used as the control group, the doctor should make a clinical diagnosis, and on the basis of triple therapy, use oral tepredone in patients with chronic atrophic gastritis to assist the patient's treatment. The dose of tepredone is 50 mg three times daily and should be instructed to 80 patients with chronic atrophic gastritis in the study group half an hour before meals. The treatment cycle was the same as that of the control group, with a two-week treatment cycle to better compare the data.

1.3 Observe the judgment indicators

Through observation and judgment of a total of 160 patients with chronic atrophic gastritis in the two groups, the clinical manifestations (such as nausea, dyspepsia, nausea, etc.) basically disappeared, the patient's appetite was significantly improved compared with the disease, the condition was normal when the gastric mucosa examination was performed by gastroscopy, and the atrophy disappeared significantly, and the clinical treatment results were judged to be effective. The symptoms of the patient's clinical manifestations (such as nausea, indigestion, nausea, etc.) are reduced, and the area of gastric mucosal lesions is reduced by more than 50% when the gastric mucosal examination is performed by gastroscopy, and the symptoms of gastric mucosal inflammation and atrophy are reduced, then the clinical treatment results are judged to be effective; The patient's clinical manifestations (such as nausea, indigestion, nausea, etc.) have not changed, the patient's appetite has not improved significantly compared with the disease, and the condition has not changed or even worsened when using gastroscopy for gastric mucosal examination, then the clinical treatment results are judged to be invalid.

The total response rate of treatment is the sum of the number of effective cases and the number of effective cases as a percentage of the total number of treatment cases.

1.4 Statistical analysis

SPSS18.0 was used to analyze and process the relevant data in this paper, and the difference in $P<0.05$ was statistically significant.

2. Results

After the end of the course of treatment, the overall effective rate of treatment in the control group was 87.5%, the treatment response rate in the study group was 97.5%, and the treatment response rate of the patients in the study group had a clear advantage ($P<0.05$). In addition, the researchers also conducted follow-up visits to the two groups of patients, 7 patients in the control group relapsed, and 2 patients in the study group relapsed, and there was also a statistical difference between the two groups ($P<0.05$).

3. Discussion

The number of patients with chronic atrophic gastritis has increased in recent years, which has had many adverse effects on patients. According to relevant data, chronic atrophic gastritis has been listed as a precancerous lesion by the World Health Organization, which seriously affects the quality of life and safety of patients. Therefore, effective treatment plans and related measures should be sought in clinical treatment to promote early health and improve the quality of life of patients. Current treatment of these patients is based on eliminating Hp, which helps reduce morbidity and damage caused by inflammation.

There are certain treatment options for chronic atrophic gastritis, and most of them use triple therapy of pectin bismuth, amoxicillin, and clarithromycin to control the remission of the condition. However, at present, the combination of three classes of drugs still has certain limitations, and many treatment cases show that the combination of pectin bismuth + amoxicillin+ clarithromycin has a high probability of recurrence. Therefore, how to improve the treatment effect of chronic atrophic gastritis has become one of the key research directions of gastroenterology treatment.

Tepredone is a clinical conventional drug for the treatment of gastric ulcers and other diseases, which can promote the production of endogenous prostaglandins, and induce the expression of HSP70 to repair damaged proteins, promote the reformation of epithelial cells, repair gastric mucosal tissue, reduce the occurrence of inflammation, and better protect the gastric mucosa.

Based on this, the treatment of chronic atrophic gastritis is clinically started with tepredone for the treatment of chronic atrophic gastritis. Teprenone can effectively inhibit gastric acid secretion, protect and repair gastric mucosa, is a clinical conventional drug for the treatment of gastric ulcer and other diseases, used in the clinical treatment of chronic atrophic gastritis, has the positive therapeutic effect of improving the patient's appetite, improving the patient's adverse symptoms, reducing the recurrence rate, can effectively repair the patient's gastric mucosal tissue, and improve the patient's gastric mucosal defense ability, can significantly improve the patient's quality of life, help the patient build confidence.

In summary, the use of teprenone in the clinical treatment of gastroenterology in patients with chronic atrophic gastritis can effectively improve the treatment effect of chronic atrophic gastritis, alleviate the adverse symptoms of patients with chronic atrophic gastritis, reduce the recurrence rate, and improve the quality of life of patients. Therefore, in the treatment of patients with chronic atrophic gastritis, combination drugs can be used to improve the efficacy and promote the application of tepredone in the treatment of chronic atrophic gastritis.

References

- [1] Qian E. Clinical Treatment Analysis of Gastroenterology in Patients with Chronic Atrophic Gastritis [J]. *World's Latest Medical Information Abstract*, 2017,17 (90): 156.
- [2] Li XH. Clinical Treatment Analysis of Gastroenterology in Patients with Chronic Atrophic Gastritis [J]. *World's Latest Medical Information Abstract*, 2017,17 (73): 35+43.
- [3] Han DH. Clinical Treatment Analysis of Gastroenterology in Patients with Chronic Atrophic Gastritis [J]. *Electronic*

Journal of Clinical Medical Literature, 2017,4 (47): 9196.

[4] Yang Z. Clinical Analysis of Internal Medicine Treatment for Patients with Chronic Atrophic Gastritis [J]. *Chinese Journal of Practical Medicine*, 2017,12 (06): 125-126.

[5] Cai N. Clinical Treatment Experience of Gastroenterology in Patients with Chronic Atrophic Gastritis [J]. *Journal of Clinical Rational Drug Use*, 2016,9 (35): 47-48.

[6] Liu XM. Clinical Treatment Experience in Gastroenterology for Patients with Chronic Atrophic Gastritis [J]. *World Latest Medical Information Digest*, 2016,16 (38): 54+57.

[7] Chen DL. Study on the Effectiveness of Standardized Treatment in Digestive Medicine for Patients with Chronic Atrophic Gastritis [J]. *Contemporary Medicine*, 2016,22 (06): 130-131.