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OR Bismuth quadruple therapy (if avai Consider bismuth regimen first line if: Allergy to first line a Patient has received PPI Every 1 PLUS Bismuth preparation 120 mg PLUS Metronidazole 400 mg	/ailable): f: antibiotic(s) ed clarithromycin in the p					
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Patient has received PPI Every 1 PLUS Bismuth preparation PLUS Metronidazole A00 mg	ed clarithromycin in the p		Consider bismuth regimen first line if:			
PPI Every 1 PLUS 120 mg Bismuth preparation 120 mg PLUS 400 mg		• Allergy to first line antibiotic(s)				
PLUSBismuth preparation120 mgPLUS400 mg	1.7 hours					
Bismuth preparation 120 mg PLUS Metronidazole 400 mg		14 days	Some bismuth products are unlicensed (e.g. DeNoltab®) or OTC preparations			
	g every 6 hours		(e.g. Pepto-Bismol®) and may not have a GMS code. Please check with Community			
PIUS	g every 8 hours		Pharmacist for further information.			
	g every 12 hours					
2nd choice options:						
Second-line therapy depends on the first-line therapy and should not be the same treatment. The options are:						
 Clarithromycin-based triple therapy for 14 days Bismuth quadruple therapy for 14 days Levofloxacin-based triple therapy for 14 days 						
Clarithromycin-based triple therapy (for penicillin allergy)						
PPI Every 1	12 hours	14 days				
PLUS Clarithromycin 500mg	a over 12 hours					
PLUS Soomg	g every 12 hours					
Metronidazole 400mg	g every 12 hours					
OR						
Levofloxacin-based triple therapy:						
Should be reserved for second line, in the case of failed eradication						
	12 hours	14 days				
-	t avany 12 hours					
PLUS Amoxicillin 1g even	g every 12 hours					