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**Efficacy and safety of keverprazan-amoxicillin dual therapy for *Helicobacter pylori* first-line treatment**

**Protocol Number: BW-Z2314    Version Number: 1.1**

**Version Date: February 19,2024**

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**Efficacy and safety of keverprazan-amoxicillin dual therapy  
for *Helicobacter pylori* first-line treatment**

**(Open-label, randomized controlled study)**

**(Protocol Number: BW-Z2314)**

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**JUN YE**

**Version Number: 1.1**

## Protocol Summary

<b>Protocol Number</b>	<b>BW-Z2314</b>
<b>Protocol Title</b>	<b>Efficacy and safety of keverprazan-amoxicillin dual therapy for <i>Helicobacter pylori</i> first-line treatment</b>
<b>Version Number</b>	<b>1.1</b>
<b>Observation Subjects</b>	<b>Patients with <i>Helicobacter pylori</i> (Hp) infection who require eradication therapy</b>
<b>Study Objective</b>	<p>To compare with rabeprazole quadruple therapy and evaluate the efficacy and safety of different treatment durations (10 days, 14 days) of keverprazan combined with amoxicillin dual therapy for Hp eradication</p> <p>To evaluate the efficacy and safety of keverprazan combined with amoxicillin dual therapy of different durations (10-day and 14-day) for Hp eradication, in comparison with rabeprazole-based quadruple therapy</p>
<b>Study Design</b>	<b>Open-label, randomized controlled study</b>
<b>Total Number of Cases</b>	<b>414 patients</b>
<b>Eligibility Criteria / Inclusion and Exclusion Criteria</b>	<p><b>Inclusion Criteria</b></p> <ol style="list-style-type: none"> <li>1) Adult patients aged 18 to 65 years old, regardless of gender;</li> <li>2) <i>H. pylori</i> positive, diagnosed a 13C-urea breath test (13C-UBT), <sup>14</sup>C-urea breath test (<sup>14</sup>C-UBT), H&amp;E staining or bacterial culture;</li> <li>3) No previous history of <i>H. pylori</i> eradication therapy;</li> <li>4) Subjects able to independently complete the recording of the subject diary card;</li> <li>5) Subjects who fully understand the trial content, voluntarily participate in the trial, can complete the trial process, and sign the informed consent form.</li> </ol> <p><b>Exclusion Criteria</b></p> <ol style="list-style-type: none"> <li>1) Use of acid-suppressing drugs such as proton pump inhibitors (PPIs), potassium-competitive acid blocker (P-CAB), H<sub>2</sub> receptor antagonists, etc., within 2 weeks before enrollment, or use of antibiotics within 4 weeks before enrollment;</li> <li>2) Active peptic ulcer with complications such as bleeding, perforation, obstruction, canceration, etc.;</li> </ol>

	<p>3) Previous history of esophageal or gastric surgery;</p> <p>4) Severe systemic diseases, including diseases of major organs dysfunction such as (cardiac, pulmonary, cerebral), hepatic or renal impairment, malignant neoplasms , or other diseases;</p> <p>5) Participants with allergies or hypersensitivity to keverprazan, rabeprazole, amoxicillin, clarithromycin, bismuth agents, including its excipients (such as mannitol, microcrystalline cellulose, crospovidone, hypromellose, magnesium stearate, etc.);</p> <p>6) Female participants who are pregnant, breastfeeding;</p> <p>7) Long-term alcohol abuse or any other conditions that increase the risk of treatment-related adverse events;</p> <p>8) Participation in other studies within the past 3 months, inability to clearly express oneself, or inability to cooperate with investigators;</p> <p>9) Deemed unsuitable for participation in the study by the investigator for any other reason.</p>
Investigational Drugs	<p>Keverprazan Hydrochloride Tablets, specification: 10mg/tablet, trade name: Beiwen®, manufacturer: Nanjing Co-phine Shenghui Pharmaceutical Co., Ltd.</p> <p>Rabeprazole Sodium Enteric-coated Tablets, specification: 10mg/tablet, trade name: Pariet® , manufacturer: Eisai (China) Pharmaceutical Co., Ltd.</p>
Treatment Protocols	<p>Keverprazan dual therapy for 10 days (K10 group): Keverprazan 20 mg per dose, twice daily (bid) + Amoxicillin 1 g per dose, three times (tid) daily, for 10 days.</p> <p>Keverprazan dual therapy for 14 days (K14 group): Keverprazan 20 mg, bid + Amoxicillin 1 g, tid, for 14 days.</p> <p>Rabeprazole quadruple therapy for 14 days (R14 group): Rabeprazole sodium 10 mg + Amoxicillin 1 g + Clarithromycin 500 mg + Colloidal pectin bismuth 200 mg, bid, for 14 days.</p>
Efficacy Endpoints	<p><i>H. pylori</i> eradication rate 6-8 weeks after the end of eradication treatment.</p>

<b>Safety Endpoints</b>	<b>1) Vital signs, physical examination;</b> <b>2) Adverse events and serious adverse events.</b>
<b>Study Procedures</b>	<p>Screening period: -7 to 0 days</p> <ol style="list-style-type: none"> <li>1) Obtain informed consent;</li> <li>2) Collect demographic information and baseline characteristics of the subject;</li> <li>3) Record medical history and current treatment, concomitant medications (including prescription and over-the-counter drugs);</li> <li>4) Vital signs, physical examination;</li> <li>5) <i>H. pylori</i> test;</li> <li>6) Review inclusion and exclusion criteria;</li> <li>7) Eligible subjects will be randomized to receive assigned treatment based on randomization numbers.</li> </ol> <p>Visit period V2 (telephone visit):  K10 group: 10 days (<math>\pm 3</math> days), K14 group: 14 days (<math>\pm 3</math> days), R14 group: 14 days (<math>\pm 3</math> days)</p> <ol style="list-style-type: none"> <li>1) Vital signs, physical examination;</li> <li>2) Record concomitant medications;</li> <li>3) Record adverse events after medication.</li> </ol> <p>Visit period V3: 9 weeks (<math>\pm 7</math> days)</p> <ol style="list-style-type: none"> <li>1) Vital signs, physical examination;</li> <li>2) <i>H. pylori</i> test;</li> <li>3) Record concomitant medications;</li> <li>4) Record adverse events after medication.</li> </ol>
<b>Statistical Analysis</b>	<p><b>Efficacy Endpoints:</b></p> <p>The primary efficacy endpoint is the proportion of subjects achieving successful <i>Helicobacter pylori</i> eradication 6-8 weeks after completion of first-line therapy. Eradication rates will be reported with two-sided 95% confidence intervals (CIs) calculated using the Clopper-Pearson method. Inter-group differences will be estimated along with their 95% CIs using the Miettinen-Nurminen method. Inter-group comparisons will be performed using the chi-square test or Fisher's exact test, as appropriate.</p> <p><b>Safety Endpoints:</b></p> <p>Adverse events (AEs) will be coded using the Medical Dictionary for Regulatory Activities (MedDRA) and</p>

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	<b>summarized by System Organ Class (SOC) and Preferred Term (PT). The number of subjects experiencing AEs, event counts, and incidence rates will be calculated. Between-group comparisons of AE incidence will be assessed using Fisher's exact test.</b>
<b>Study Duration</b>	<b>8 to 10 weeks</b>