Esomeprazole and aspirin in Barrett's oesophagus (AspECT): a randomised factorial trial

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- Oesophageal adenocarcinoma is the 6th most common cause of cancer death worldwide and Barrett's oesophagus is the biggest risk factor. This study evaluated the efficacy of high-dose esomeprazole proton-pump inhibitor (PPI) and aspirin for improving outcomes in patients with Barrett's oesophagus. *(Change from squamous epithelium to columnar epithelium of the oesophagus is called Barrett's oesophagus)*

- 705 patients were assigned to low dose PPI & no aspirin, 704 to high-dose PPI & no aspirin, 571 to low-dose PPI & aspirin, and 577 to high-dose PPI & aspirin, across 84 centres in UK & Canada. Median follow-up & treatment duration was 8·9 years.

- High-dose PPI (139 events in 1270 patients) was superior to low-dose PPI (174 events in 1265 patients); Combining high-dose PPI with aspirin had the strongest effect compared with low-dose PPI without aspirin.

High-dose PPI and aspirin chemoprevention therapy (medicines that can slow the progress of cancer), especially in combination, significantly and safely improved outcomes in patients with Barrett's oesophagus.