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PREVALENCE OF HELICOBACTER PYLORI AMONG DYSPEPTIC PATIENTS IN BAHRAIN

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One hundred patients with dyspepsia undergoing upper gastrointestinal endoscopy were examined for the presence of Helicobacter pylori (HP) using cultures from duodenal, antral and proximal gastric biopsies and also by serology. Antral biopsies showed the highest prevalence of HP (75%) compared to proximal gastric (72%) and duodenal biopsies (28%). Cultures revealed more positive (75%) than serology (54%). Patients with chronic duodenal ulcer (31 patients) showed similar differences (87.1% positive for culture vs 45.16% for serology) as did those with normal endoscopy (72.4% positive for culture vs 51.7% for serology). HP positivity by culture tended to increase with the duration of dyspepsia but not with age. Patients with dyspepsia and normal endoscopic findings were less likely to have HP.

These findings demonstrate a high prevalence of HP in Bahraini dyspeptic patients and suggest a positive association of HP with the duration of dyspepsia and with abnormal endoscopic findings.

Warren and Marshall's original article in 19831 of curved gram negative bacilli in the gastric mucosa of patients with gastritis has resulted in extensive literature over the past decade linking Helicobacter pylori (HP) to a spectrum of acid peptic diseases including antral gastritis, chronic duodenal ulcer, gastric ulcer², non-ulcer dyspepsia³ and more recently with the aetiology of gastric cancer^{8,9}. Population based seropositivity rates of H. pylori infection were studied across 17 countries and showed a prevalence ranging from 55-90% in Japan to 8-49% in the United Kingdom,