THE FREQUENCY OF HELICOBACTER PYLORI INFECTION AND THE EFFECT OF ERADICATION THERAPY ON SYMPTOM IMPROVEMENT IN FUNCTIONAL DYSPEPSIA SUBGROUPS ACCORDING TO ROME IV CRITERIA: A STUDY FROM TURKEY WITH A HIGH PREVALENCE OF HELICOBACTER PYLORI

Mustafa Ihsan Uslan

UEG Week Vienna 2024 | Poster

Stomach & H. Pylori

October 13, 2024

A Turkish study of functional dyspepsia patients classified by Rome IV criteria found that Helicobacter pylori infection was significantly more common in epigastric pain syndrome (73.1%) than in postprandial distress syndrome (41%) or overlapping subgroups (43.9%), though eradication therapy produced similar symptomatic improvement rates across all subgroups at 12 months (70.5% to 82.6%).

KEY POINTS

- H. pylori frequency differed significantly by Rome IV subgroup: 73.1% in epigastric pain syndrome, 41% in postprandial distress syndrome, and 43.9% in overlapping subgroups ($p<0.001$).
- Among H. pylori-positive patients who received eradication therapy, symptomatic response rates at 12 months were 70.5% in epigastric pain syndrome, 71.4% in postprandial distress syndrome, and 82.6% in overlapping subgroups, with no significant difference between subgroups ($p>0.05$).
- Eradicated patients showed 70.2% symptomatic improvement at 12 months, while none of the non-eradicated patients experienced symptomatic improvement.
- The authors recommend screening all functional dyspepsia subgroups, particularly epigastric pain syndrome, for H. pylori and eradicating if detected in high-prevalence regions.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/772288a0-9110-11ef-9699-0242ac140004

AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.