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# ILLINOIS GASTROENTEROLOGY INSTITUTE

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## WHAT IS HELICOBACTER PYLORI?

**Helicobacter pylori** is a newly discovered bacteria which lives in the rich mucus lining of the stomach. The infection is quite common, occurring in about 20% of the U.S. population. It is more common in older people and quite rare in children.

**H. pylori** causes inflammation of the stomach lining (active chronic gastritis) and may persist in the stomach for many years. Gastritis is a condition which frequently accompanies ulcer disease. In fact, 95% of patients with duodenal ulcer had **H. pylori** and gastritis.

## DOES H. PYLORI CAUSE SYMPTOMS?

Some people with gastritis due to **H. pylori** have no symptoms, but many report nausea, gas, bloating, and burning stomach pain. Medicines which decrease acid in the stomach will temporarily relieve the pain, but they do not heal the inflammation.

Clearance of **H. pylori** is the only treatment shown to heal gastritis.

## DOES H. PYLORI CAUSE ULCERS?

**H. pylori**, by itself, does not cause ulcers. However, by weakening the stomach lining, it makes the stomach more susceptible to damage by acid. When ulcers are healed by conventional anti-acid therapy, they frequently return when the medication is discontinued. In an estimated 60-80 percent of cases, the ulcer recurs eventually if treatment is discontinued. If **H. pylori** is successfully treated, however, the stomach's defenses against acid are restored and the ulcer is much less likely to recur.

## WHERE DID I GET IT?

No one knows how **H. pylori** is acquired. It tends to be more common in spouses of infected patients than in the general population. This may mean that it is spread from person to person or that it was acquired from a common source. Since **H. pylori** is less common in young persons, older people who have it may have been infected many years ago, perhaps when they were children.

## HOW IS THE INFECTION DIAGNOSED?

During examination of the stomach with a flexible scope, a tiny pinch of the stomach lining is obtained. This specimen is sent to a local laboratory. We will notify you of the results in about a week.

## HOW IS IT TREATED?

**H. pylori** may be difficult to cure. Many studies are currently in progress to determine the most effective therapy. Your physician may utilize a one or two week course of bismuth subsalicylate (Pepto-Bismol), two tablets taken on an empty stomach four times daily. Also, one or two antibiotics (Metronidazole and Tetracycline or Amoxicillin) are usually added to the treatment program. Recent studies have shown these treatments to be 80-90 percent effective.