

Letters to the Editor

Prevalence of *Helicobacter pylori* infection in patients with inflammatory bowel disease: pilot study

Key words: Helicobacter pylori. Crohn's disease. Ulcerative colitis. Inflammatory bowel disease.

Dear Editor,

In a recent interesting letter, Varas-Lorenzo and Muñoz-Agel reported on the prevalence of active *Helicobacter pylori* (Hp) infection in patients with inflammatory bowel disease (IBD). The authors demonstrated that the infection, diagnosed by ¹³C urea breath test (UBT), was present in 50% of patients with Crohn's disease (CD), in 37% of patients with ulcerative colitis (UC) and in 40% of controls. These differences were not statistically significant (1).

Data on the prevalence of Hp infection in patients with CD or UC seem lower than control population but they may be biased by a previous use of antimicrobials (2). To evaluate the active prevalence of Hp infection in patients with IBD diagnosed for the first time, we have performed a pilot case-control study in Turin, Italy. Twenty patients, 11 males and 9 females with IBD (12 CD and 8 CU), were compared to 29 controls comprised of 11 males and 18 females affected by idiopathic constipation. Mean age of patients was 45.1 years (22-76) versus 49.2 (28-76) in the controls. At the moment of diagnosis, all patients were screened for the presence of Hp by the ¹³C UBT, as described elsewhere (3). Subjects in whom IBD was confirmed

underwent upper GI endoscopy. Hp infection was shown in 60% (12/20) of patients with IBD versus 41% among controls (12/29). Statistical analysis, performed by chi square test, showed no significant differences between the two groups (chi square= 1.64; p = 0.2). In 14/20 IBD patients, endoscopy evidenced an abnormal pattern (in 7 antral gastritis, in 4 duodenal ulcer, and in 3 duodenitis); in 8 of them, ¹³C UBT showed the presence of Hp, in the remaining 6 (3 with duodenal erosions and 3 with gastritis) the bacterium was absent. The data here-with regarding gastroduodenal lesions are similar to those reported by other groups (4).

In conclusion, concurring with the work by Varas-Lorenzo and Muñoz-Agel, in patients with IBD diagnosed for the first time, in absence of antibiotic treatment, the prevalence of active Hp infection is not significantly different than in controls.

R. Pellicano, F. Bresso, B. Demarchi, L. Bertolusso,
N. Sapone, M. Rizzetto and M. Astegiano

*S.C. Gastro-Hepatology D.U., Ospedale S. Giovanni Battista
(Molinette). Turin, Italy*

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