

ROLE OF HELICOBACTER PYLORI INFECTION IN PEPTIC ULCER DISEASE

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ABSTRACT

The discovery of *Helicobacter pylori* in 1982 confirmed its role in the gastric ulcer disease. With medical advances and introduction of new antimicrobial agents with extended spectrum against *H.pylori*, the high mortality rate associated with the organism in gastric cancer continues. Gastric acid hypersecretion is still considered to be a necessary factor; it is not a sufficient etiological factor. Extensive scientific research shows that two major etiological factors involved in PUD are infection with *H.pylori* and ingestion of non-inflammatory drugs (NSAIDs). Diet and genetic are important factors. Persons with serological evidence of carrying *cag*-positive strains are at high risk of developing both PUD and gastric carcinoma. Diagnosis of *H.pylori* infection both by invasively by endoscopy and biopsy or noninvasively by serologic analysis, and breath test. Common therapies include proton pump inhibitor, such as omeprazole and lansoprazole, and are used as parts of triple, quadruple, and sequential therapies.

KEYWORDS: Helicobacter Pylori, Peptic Ulcer Disease, Nsaids