

Vitalan Stool Diagnostics

***Helicobacter pylori* Antigen in stool: diagnosis of Gastritis/Duodenitis**

Occurrence:

Helicobacter pylori is one of the main causes for **Gastritis, Duodenal Ulcers and Lymphoma of GALT** (Gut-Associated-Lymphoid-Tissue) and besides this a **Risk Factor for Stomach Cancer**. Epidemiological Studies proof, depending on region, Infection Rates of 30-80%. In most regions of the UK over 30%, at Age over 45 years over 50%.

Clinical Symptoms:

The *H.pylori*-Infection occurs asymptomatic, as clinical irrelevant Inflammation as well as main cause for **severe gastroduodenal problems** like Ulcus Ventriculi and/or Duodeni or Gastric Carcinoma and Lymphoma. The course of events is hard to predict, the Indication for Eradication of *H.pylori* results mainly from clinical symptoms.

Diagnostics:

Diagnosis of *H.pylori* is based on **invasive** (and expensive Endoscopy for Histology or Urea-Test), **semi-invasive** (and expensive Breath-Test) or **Serology** (who is not showing reliable the active illness).

The **non-invasive Stool-Test** facilitates the diagnosis of active illness as well as the control of therapy with high specificity and sensitivity (compared with histology) of 95,3% for adults and 98,6% for children, compared with breath-test of 100%. Further advantages are easy to take sample, fast turnaround and low price.

Indication:

The *H.pylori*-Stooltest is indicated for All Patients *under* the age of 45 years with **Dyspeptic Symptoms (Heartburn, Stomach Pressure, Pain** in upper abdomen before and after meal, **Gas, Bloating**), **for Children and for Therapy Control.**

The *H.pylori*-Stooltest is indicated for All Patients *over* the age of 45 years with **supplementary Alarm Symptoms (Anemia, Weight Loss, Malassimilation, Occult Bleeding, Diarrhea)** together with Gastroscopy and Histology. Histology is needed for Culture and Antibiotic Testing of *Helicobacter pylori* – resistance rates raises.

Therapy:

Prescription Drugs: the Standard is the „**Italian**“ **Triple Therapy**, the Combination of Gastric-Acid-Blocker (H₂-Antagonist like....) with Antibiotics Erythromycin resp. Clarithromycin (like....) and Metronidazol (like ...). These Antibiotics are not effective in case of Resistance.

Plant Extracts: there is no Standard but Personal Reports about good results in Eradication with **Mastix** and other plant extracts (like berberin, citrus seed, gentiana, hydrastis, juglans, allium – best in Combination, like.....).