

## CLINICAL UPDATE 1 - APRIL 2012

### Dear Distributor,

You now have received the first Clinical Newsletter, which we intend to send to you on a regular basis. The subject today is the very recently published updated Guidelines for management of *Helicobacter pylori* infection.

### **New Guidelines for the Management of *Helicobacter pylori* Infection.**

The European Helicobacter Study Group has issued updated Guidelines, the Maastricht IV / Florence Consensus Report. The article has just been published in Gut 2012;61:646-664. (Please see encl.)

This article is a fantastic tool to use in the promotion of UBT to detect *Helicobacter pylori* infection. Please make use of it when discussing with your customers, present and potential new ones.

#### **The following conclusions can be drawn from the article:**

##### MANAGEMENT OF H PYLORI INFECTION

“The UBT using essentially <sup>13</sup>C urea remains the best test to diagnose *H pylori* infection, has a high accuracy and is easy to perform”.

##### TEST-AND-TREAT STRATEGY

Statement 1: A test-and-treat strategy is appropriate for uninvestigated dyspepsia in populations where the *H pylori* prevalence is high (>20 %).

##### PREVENTION OF GASTRIC CANCER AND OTHER COMPLICATIONS

Statement 9: There is strong evidence that *H pylori* eradication reduces the risk of gastric cancer development.

Statement 13: A screen-and-treat strategy of *H pylori* should be explored in communities with a significant burden of gastric cancer.

Statement 17: *H pylori* eradication to prevent gastric cancer should be undertaken in populations at high risk.

##### SUMMARY

“Quality of life can be significantly improved through accurate diagnosis and appropriate treatment”

Comments from Kibion:

*In the article it is stated that stool antigen test, if based on monoclonal antibodies, has equivalent accuracy to UBT. We would like to point out the disadvantages of a stool test in comparison to UBT.*

*-Both sampling and handling of the specimen is very inconvenient.*

*-There is a low patient acceptance.*

*-Storage temperature is 2-8 degrees, max 3 days. If samples have to be stored for a longer time they have to be frozen.*

Finally, we would be happy to receive any comment you might have to this information and if you have got any input from your customers.

Best regards

KIBION

/Ingegerd