



Helicobacter pylori

Helicobacter pylori (*H. pylori*) is the bacteria responsible for most [ulcers](#) and many cases of stomach inflammation (chronic gastritis).

The bacteria can weaken the protective coating of the stomach, allowing digestive juices to irritate the sensitive stomach lining.

Causes

As many as half of the world's population is infected with *H. pylori*. Those living in developing countries or crowded, unsanitary conditions are most likely to contract the bacterium, which is passed from person to person. *H. pylori* only grows in the stomach, and is usually contracted during childhood.

Interestingly, many people have this organism in their stomach, but don't get an ulcer or gastritis. Coffee drinking, smoking, and drinking alcohol increase your risk for an ulcer from *H. pylori*.

Symptoms

If you are a carrier of *H. pylori*, you may have no symptoms. If you have an ulcer or gastritis, you may have some of the following symptoms:

- Abdominal pain
- Bloating and fullness
- [Dyspepsia](#) or indigestion
- Feeling very hungry 1 to 3 hours after eating
- Mild nausea (may be relieved by vomiting)

Exams and Tests

Simple blood, breath, and stool tests can determine if you are infected with *H. pylori*. If you have symptoms, your doctor will determine if you should have these screening tests.

The most accurate way to diagnose *H. pylori* is through [upper endoscopy](#) of the esophagus, stomach, and duodenum. Because this procedure is invasive, it is generally only done on people suspected to have an ulcer, or who are at high risk for ulcers or other complications from *H. pylori*, such as stomach cancer.

Risk factors include being over 45 or having symptoms such as:

- [Anemia](#)
- Difficulty swallowing
- [Gastrointestinal bleeding](#)
- Unexplained weight loss

Following treatment, breath and stool tests can determine if you have been cured of the infection.

Treatment

Patients who have *H. pylori* and also have an ulcer are most likely to benefit from being treated. Patients who only have heartburn or acid reflux and *H. pylori* are less likely to benefit from treatment. The treatment does not work in all patients.

Treatment must be taken for 10 to 14 days. Medications may include:

- Two different antibiotics, such as clarithromycin (Biaxin), amoxicillin, tetracycline, or metronidazole (Flagyl)
- Proton-pump inhibitors, such as omeprazole (Prilosec), lansoprazole (Prevacid), or esomeprazole (Nexium)
- Bismuth subsalicylate (Pepto-Bismol), in some cases

Outlook (Prognosis)

Once the *H. pylori* bacteria are gone from your body, the chance of being infected again is very low.

Possible Complications

H. pylori infection is linked to stomach cancer and ulcer disease.

IMPORTANT REMINDER:

This information is intended only to provide general guidance. It does not provide definitive medical advice. It is very important that you consult your doctor about your specific condition.