Helicobacter pylori Infections

Recommendations for Its Laboratory Diagnosis

Given the widespread prevalence of *H. pylori* infection and its enormous financial impact on the healthcare industry, the American College of Gastroenterology (ACG) and the American Gastroenterological Association (AGA) have established recommendations and best practice guidelines to assist physicians caring for patients with *H. pylori* infection.

These best practice guidelines are based upon the use of a non-invasive laboratory test that can clearly establish the presence of active *H. pylori*.

**Accordingly, serologic tests that screen for the presence of *H. pylori* antibodies are no longer recommended by the ACG or AGA because serology does not test for the presence of active disease.**

In fact, studies have shown that 50% of positive serologic tests are not indicative of active, but rather, past infection.

Because of this, the ACG and AGA recommend the use of *H. pylori* stool antigen (HpSA) test as a non-invasive test of choice for establishing the laboratory diagnosis of active infection.

The HpSA test is the preferred method because it is not only highly sensitive, but is a more cost effective and less expensive means of establishing the laboratory diagnosis of infection. In addition, the HpSA test is the only test approved by the FDA for use in the initial diagnosis, therapeutic-monitoring, and retesting to confirm eradication of *H. pylori* infection. Also HpSA test is approved for use in both adult and pediatric patients.

For test of cure, wait 28 days after antibiotic or bismuth therapy before submitting HpSA specimen.

*H. pylori* Antigen Test—performed Daily at MML

*H. pylori* Antibody Test—performed on Thursday at MML

PYA / October 2012

Metropolitan Medical Laboratory, PLC
1520 Seventh Street, Moline, IL 61265 309-762-8555
1828 E. Locust Street, Davenport, IA 52803 563-324-0471