

HELICOBACTER PYLORI INFECTION IN PEPTIC ULCER DISEASE: THE IMPORTANCE OF SMOKING AND ETHNICITY

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Abstract. This study was conducted to determine the prevalence of *Helicobacter pylori* (*H. pylori*) and its associated factors among patients with peptic ulcer disease in Taiping Hospital. Consecutive peptic ulcer disease patients who had undergone esophagogastro-duodenoscopy were included. The *H. pylori* status was assessed by the rapid urease test. We excluded those who had active bleeding, a perforated peptic ulcer, severe vomiting, a history of gastric surgery, peptic ulcer disease or renal or liver diseases, carcinoma of the stomach, and recent use of antibiotics or proton pump inhibitors. Socio-demography, *H. pylori* status, medication history and other relevant clinical data were collected from case notes. A total of 416 subjects were selected, 49.7% were positive and 50.3% were negative for *H. pylori* infection. There were significant associations between *H. pylori* and age, ethnicity, smoking status and NSAID usage. However, there were no significant relationships between *H. pylori* status and gender or type of peptic ulcer. Multiple logistic regression showed that other ethnicities than Malays and smokers had a higher risk of *H. pylori*. Our prevalence rate was low and the identified risk factors were consistent with previous studies. Ethnic differences may be related to genetic and sociocultural behaviors. Quitting smoking may benefit peptic ulcer patients with *H. pylori* infection.

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