

# GASTROENTEROLOGY AND DIGESTIVE DISORDERS

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## Helicobacter infection among dyspeptic and non-dyspeptic HIV patient at Yeka Health Center: Case control study

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**Background:** *Helicobacter pylori* are a potent engenderer of urease. HIV infected patients experience many forms of opportunistic infections, including gastrointestinal symptoms. The exact role of *H. pylori* infection among HIV infected patients in causing gastrointestinal symptoms such as dyspepsia remains obscure. There are circumscribed data regarding *H. pylori* infection in HIV positive patients in cognation to CD4 count in our region and country. There for we aimed to assess the prevalence of *H. pylori* infection utilizing stool antigen among dyspeptic and non-dyspeptic HIV patients and its cognation with CD4 T cell count.

**Methods:** A case control study enrolling 370 study participants was conducted from January- June 2017. Socio-demographic and clinical data were amassed and 3 milliliter blood was drawn aseptically for the CD4+T cell count and complete blood count. Stool samples were accumulated for *H. pylori* stool antigen test. Data ingression and analysis was done utilizing SPSS version 20.confidence level of 95%was used statistical significance.

**Results:** A total of 185 cases and 185 controls were participated in the study. *H. pylori* antigen was detected in 117 (31.62%) of the total participants. The prevalence of *H. pylori* infection of cases and control was 60/185 (32.43%) and 57/185 (30.81%), respectively (AOR=1.097, 95% CI: 0.689-1.747, p=0.697). In both case and control groups, no significant association was observed in the prevalence of *H. pylori* with age, family size, educational status, marital status, toilet use habit, occupation, alcohol drinking, cigarette smoking and khat chewing (p>0.05). In both case and control group *H. pylori* infection was higher in patients with CD4 T cell count greater than 200 cells/ $\mu$ l.

**Conclusion:** The prevalence of *H. pylori* infection was slightly higher among cases than control patients. The infection was not significantly associated with social, demographic and behavioral factors while it was higher in patients with higher CD4 T cell count. The observed prevalence of *H. pylori* stool antigen positivity necessitates the need to diagnose it in patients with higher CD4 T cell count and thus minimize the clinical consequences of infection.

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