

### Question 44 – June 9

A 55 year old woman from Korea presents with burning epigastric pain. The pain is 4/10 and radiates into her chest. She has had a workup for cardiac causes of her symptoms and this did not reveal a cause of the symptoms. She has no family history of esophageal cancer or history of tobacco use. An endoscopy was performed that showed a normal esophagus and antral erythema. Esophageal biopsies showed 8 eosinophils per high power field with the antral biopsies being consistent with *H. pylori* gastritis. Which of the following statements is accurate regarding the association between *H. pylori* and gastroesophageal reflux disease?

- A. *H. pylori* is associated with a 2-fold lower prevalence of endoscopic reflux esophagitis
- B. *H. pylori* is associated with a 10-fold lower prevalence of endoscopic reflux esophagitis
- C. *H. pylori* is associated with a 2-fold higher prevalence of endoscopic reflux esophagitis
- D. *H. pylori* is associated with a 10-fold higher prevalence of endoscopic reflux esophagitis

**Answer: A**

*H. pylori* is associated with a 2-fold lower prevalence of endoscopic reflux esophagitis. This finding comes from a Korean study published in the American Journal of Gastroenterology in 2010. As a follow up within this study, when patients whose *H. pylori* had been previously eradicated there was a 2-fold increase in endoscopically detectable erosive reflux disease. The associations between *H. pylori* and esophageal disease are only now being delineated as patients who have been treated for *H. pylori* are presenting with other disease processes.

### Reference:

1. Nam SY, et al: Effect of *Helicobacter pylori* infection and its eradication on reflux esophagitis and reflux symptoms. *Am J Gastroenterol* 2010; 105(10):2153-2162.