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One hundred and twenty consecutive patients above 12 years of age with dyspepsia were studied from June 1993 to September 1994. They underwent upper gastrointestinal endoscopy to find the mucosal lesions which were associated with their dyspeptic symptoms. At endoscopy gastric mucosal biopsies were taken in order to identify *Helicobacter pylori* (*H. pylori*) using three different techniques: culture, histology and the rapid urease test. Normal looking mucosa was the commonest single endoscopic finding, accounting for 34.2%, followed by gastritis 31.7% and duodenal ulcer 29.2%. However, when duodenal ulcers and gastric ulcers were put together, then peptic ulcer was the most prevalent finding accounting for 38.4%. Peptic ulcer was the most prevalent pathological finding in both young (less than 50 years) and older patients (50 years and above). Duodenal ulcer was more prevalent than gastric ulcer in the younger age group with a ratio of 5.8:1, however, the ratio in the older age group was 1:1. Gastric cancer was only found in patients aged 50 years and above, accounting for 17.4% of dyspeptic symptoms in this age group. Females were found to have more normal endoscopic findings than males (59.6%, versus 17.8% respectively). The difference being statistically significant ($p < 0.001$). All our cases of peptic ulcer disease had evidence of *H. pylori* infection while dyspeptic patients with normal endoscopic mucosal findings had *H. pylori* in 80.5% of cases. The difference in prevalence of *H. pylori* in the two groups was statistically significant ($p < 0.001$). Surprisingly, evidence of *H. pylori* in gastric cancer cases was very low in this study, being found in only 25% of patients