The relationship between psychosomatic disorders and metabolic processes of the gastroduodenal zone in Hp-positive peptic ulcer patients

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Abstract no.: P11.36

A lower quality of life in patients with functional bowel disorders compared to those with gastric dyspepsia

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Health-related quality of life in patients with functional gastrointestinal disorders

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Helicobacter pylori eradication in the elderly patients: The eradication rates and abnormal gastrointestinal responses

J. Chung, Y. Seok and J. Kim

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GASTROINTESTINAL DISORDERS

HEALTH-RELATED QUALITY OF LIFE IN PATIENTS WITH FUNCTIONAL GASTROINTESTINAL DISORDERS

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Abstract no.: P11.38

Helicobacter pylori eradication was reported in subjects with functional gastrointestinal disorders (FGDs). Lactose intolerance, small intestinal bacterial overgrowth, alterations of gastrointestinal transit time, dyspepsia are very common in clinical practice, and could be investigated with breath test (BT) analysis. The Short Form Health Status Survey (SF-36) demonstrated internal consistency, construct validity and concurrent validity when applied to patients (pts) with significant bowel dysfunction. To assess, by SF-36, the impact of FGDs on HRQL of pts that perform BT. We enrolled from the Gastroenterology Unit of Policlinico Gemelli in Rome, 96 pts (61F, 35M; age mean ± 15 years) with FGDs who underwent H2BT and/or C13 Urea BT. HRQL was analyzed on SF36 scores and component summary scores. For each item, the mean difference and 95% confidence interval (CI) with corresponding two-tailed p-values between the pts and the general population were calculated by means of a t-test. All items analyzed by SF36 were lower compared to the normal values for the general Italian population. Mean Mental Health Index (MHI) and Physical Health Index (PHI), the two main scores of SF-36, were both greater than the normal values for the general population: MHI 39.1 ± 11.8 (nv 50, mean difference —10.9, 95% CI —15.0, —6.7; p < 0.001); PHI 45.8 ± 9.6 (nv 50, mean difference —4.2, 95% CI —7.4, —1.1; p = 0.010). Pts submitted to BT showed a lower SF36 scores compared to general population. Therefore FGDs have a significant impact on HRQL of pts in particular this kind of pts showed a significant reduction of MHI. SF36 could provide a useful aid to current methods of evaluating treatment outcomes for FGDs, and potentially other disorders.

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Helicobacter pylori eradication in the elderly patients: The eradication rates and abnormal gastrointestinal responses

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Background/Aims: Helicobacter pylori (H. pylori) infection is closely related with a wide range of gastrointestinal disease. One-week triple therapy is currently considered as the gold standard for the treatment of H. pylori for all ages. Because of increasing life expectancy, the demand for the eradication of elderly are also increased. But abnormal gastrointestinal responses are major limitations in elderly patients. The aim of our study was to evaluate the eradication rates and identify the abnormal response rates between the younger and the elderly patients.

Methods: Forty hundred and twelve patients with H. pylori infection between January 2011 and April 2013 were included (mean age: 46.7 years; range 17-83). Among 412 patients, 65 (16%) patients were older than 70 years. After 1 week of H. pylori eradication triple therapy (Pantoprazole 40 mg, clarithromycin 500 mg, amoxicillin 1 g bid), we evaluated the eradication rates and abnormal gastrointestinal responses (diarrhea, bloating, constipation, abdominal pain, bloating, flatulence, stool frequency, borborygmus, and nausea). We carefully monitor the abnormal response, we should strongly consider the eradication in the elderly group.