Patients aged <50 years with dyspepsia^{3,4}

Non-invasive tests for H. pylori³

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¹³C-UREA BREATH TEST (UBT)³

- Highest sensitivity (95%–100%) and specificity (95%–100%)
- PPIs need to be stopped 14 days before testing; current or recent antibiotic therapy needs to be excluded



SEROLOGICAL ANTIBODY DETECTION³

- Lowest sensitivity (74.4%) and specificity (59%)
- · Rapid, simple, and inexpensive
- Cannot distinguish between active and previous infection

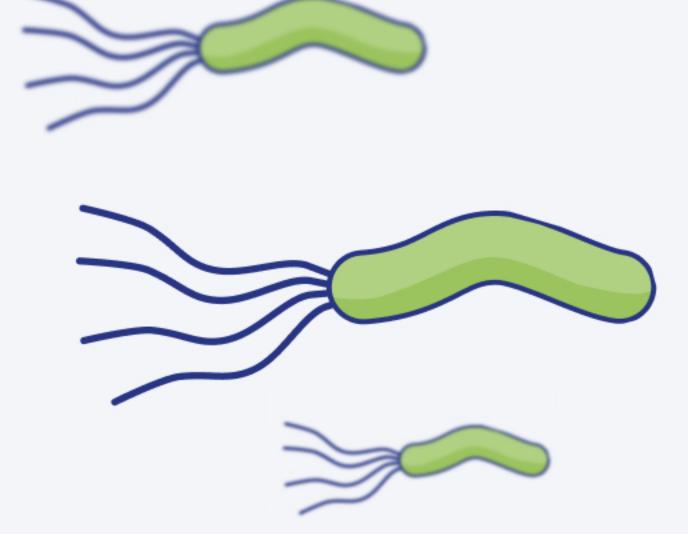


STOOL ANTIGEN TEST³

- Slightly lower sensitivity (>95%) and specificity (>95%)
 vs UBT, but higher vs serological antibody detection
- · Rapid, simple, and inexpensive

DIRECT DETECTION IN STOOL VIA PCR

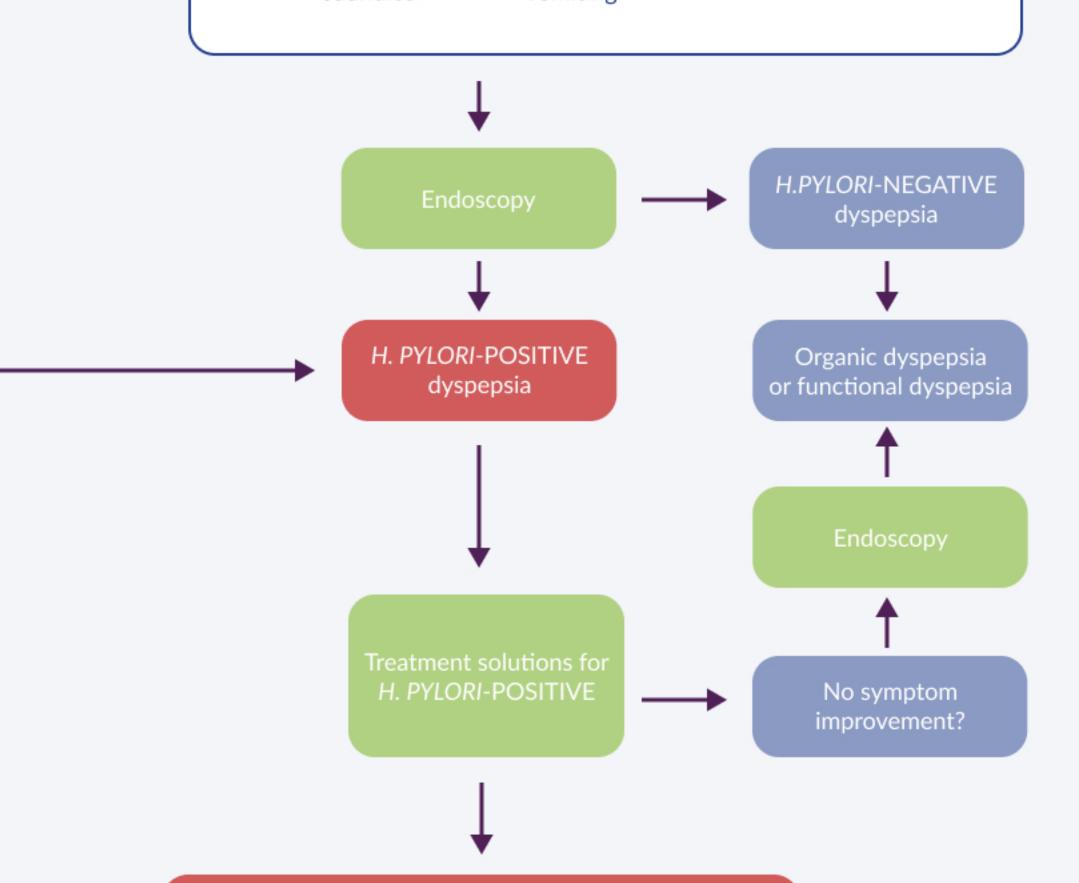
Adapted from: Malfertheiner P, et al. 2022 and 2023, and Koletzko, L, et al. 2019. 3,4,24



Patients aged ≥50 years with dyspepsia or at any age with ALARM SYMPTOMS^{3,4}

ALARM SYMPTOMS:3,22

- Dysphagia
- · Black stools/blood in stools
- Anaemia
- Unintentional weight loss
- Jaundice
- Vomiting



Re-testing to confirm eradication

Eradication of *H. pylori* can be confirmed at or after four weeks from the end of therapy **via non-invasive**¹³C-urea breath test or faecal antigen test, or by upper digestive tract endoscopy⁷