INTRODUCTION

H. pylori infection is extremely common.

The prevalence of childhood infection in many developing countries currently ranges from (80 : 100%) which is substantiality higher than in industrialized countries (*Rowland and Drumm*, 1998).

Chronic infection with H. pylori which is typically acquired in childhood and persist throughout life causes a variety of chronic disease: duodenal (*Marshal Bi and Goodwin C.S. 1988*), gastric ulcer and cancer (*Nomura and Stemmermon 1991*), and gastric lymphoms (*Porsnnet and Hansen 1994*),

Childhood infection with H. pylori has been linked to chronic diarrhea and growth retardation (*Wearer LT*: 1995),

Although there are several potential mechanisms by which H. pylori could lead to persist. Diarrhea, hypochlorhydria is the most documented risk factor for a number of enteric infections notably cholera and salmonellosis (*Katalari PH and Seow F. 1993*).

Complications of P.D. kill (3 millions) children yearly most of these complication occur in region of the world where H. pylori infection is common (*WHO*. 1994).

We hypothesiz that H. pylori infection leads to increase in persistant diarrheal illns. To test this hypothesis, we conducted a case-control study of children from first day to five year of life in Benha University Hospital Pediatric Department and Benha fever Hospital.