# Introduction

Helicobacter pylori is a species of epsilon proteobacteria which colonizes the harsh environment of the human stomach **(Chalmers et al., 2004).** Its name refers to both its spiral shape (Helicobacter) and the area of the lower stomach which it habitually colonizes: the gateway (pylorus) between the stomach and small intestine **(Meyers, 2007).** This bacterium is thought to be present within up to 50% of the human population and has been linked to the development of a number of different medical conditions **(Chalmers et al., 2004).** This treehouse will provide information about the discovery of H. pylori as well as its classification, morphology, physiology and its effects on its human hosts.

Since its first isolation 20 years ago, Helicobacter pylori (H. pylori) infection continues to generate considerable interest in the medical and scientific community. Today, H. pylori is considered one of the most common pathogenic infections of mankind, infecting nearly one half of the population.

Support for a pathogenic role for H. pylori in humans initially came from independent studies by Marshall and Morris who established that ingestion of a large inoculum of H. pylori results in infection **(Marshall et al., 2009 and Morris and Nicholson, 2009).**

Data to support the early acquisition of H. pylori infection comes from retrospective studies which estimate the incidence of new H. pylori infections to be 0.37% per patient year **(Valle et al., 2010).**

At the present time, we know that H. pylori infection clusters within families and that the acquisition of this infection is strongly linked to conditions associated with lower socioeconomic status during childhood, such as residential crowding **(Malaty et al., 2010).**