
STUDY ON HELICOBACTER PYLORI INFECTION AND CEREBOV ASCULAR STROKE

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This study was designed to explore the relation between H. pylori infection and ischemic cerebrovascular stroke through evaluation of 30 patients with ischemic cerebrovascular stroke (diagnosed by C.T.) compared to 10 apparently healthy -individuals as reference group. The study conducted in Port-Said, Port-Fouad, and El Nasr general hospitals. Each subject participating in our study was evaluated by history, clinical examination and a list of investigations (complete blood count, prothrombin activity, APTT, fibrinogen concentration, APC resistance and HP IgG). The data were collected, revised and summarized by computer facilities. The results were tabulated with the final conclusion was:- The prevalence of H. pylori seropositivity in the total population of the study was 62.5%. 2- The prevalence of H. pylori seropositivity in stroke group was 70% while in the control group was (40%) with significant statistical difference. 3- In the stroke group, the total leucocytic count -and platelet count were slightly higher in the seropositive group but with non significant difference from the seronegative. 4- The haemoglobin and red blood cells count were slightly lower in seropositive patients than seronegative. 5- The fibrinogen concentration was significantly higher in the seropositive patients than in seronegative. 6- The APC resistance prevalence in stroke group was 33.3% while it was (47.6%) in the seropositive patients with significant difference from the seronegative. As a conclusion, the increased H. pylori seropositivity among ischemic cerebrovascular stroke patients may be introduced in the aetiological profile of the disease. Also, it must be considered in the therapeutic regimen of such cases otherwise, the chronicity of H. pylori may be a triggering factor for complication of recurrence of stroke. H. pylori Ab evaluation for patients with cerebrovascular stroke may be of diagnostic and prognostic values. RECOMBADZINDAVZOBTS1- Chronic infections and H. pylori infection in particular must be introduced in the focus of interest in the aetiological profile of cerebrovascular stroke and similar conditions. 2- The recurrence rate of cerebrovascular stroke in H. pylori seropositive patients must be monitored and modified by proper treatment of patients. 3- H. pylori may be of crucial clinical value in evaluation of patients with cerebrovascular stroke. 4- The detailed caused relation between H. pylori and stroke may be a field of further work.