

Helicobacter pylori status and endoscopic findings in Japan

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I read with a great interest the recently published article by Shiota et al. The article is well designed and has important outcomes on the relationship between *H. pylori* status and endoscopic findings in dyspeptic patients [1]. However, I think that this study has two limitations. The first is related to the lack of data on family history for the study population. In *H. pylori* infection, polymorphisms involving IL-1 are reported to be linked with duodenal ulcer disease in Japan [2]. The second limitation is related to the absence of the serological CagA status of the patients. The disease risk in CagA⁺ subjects may be different from the disease risk in CagA⁻ ones. Accordingly, the CagA⁺ virulent strain may protect against the development of severe esophagitis [3, 4]. CagA serology is easy to perform, and may replace serology against *H. pylori* whole antigens in the future.

References

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