PRIMARY ANTIBIOTIC RESISTANCE OF HELICOBACTER PYLORI IN PATIENTS WITH DISPEPSIA IN CROATIA OVER THE PERIOD FROM MARCH 2005 TO JULY 2008.

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Introduction: Helicobacter pylori infection is the main etiologic factor in chronic active gastritis, peptic ulcers and gastric malignancies. Primary antibiotic resistance of Helicobacter pylori has a significant role in eradication of H. pylori, as it is considered the most common reason of therapy failure.

Aims: Our aim was to determine the incidence of primary resistance of H. pylori to clarithromycin, metronidazole, amoxycillin and moxifloxacin from 265 dyspeptic patients in Croatia over the period from March 2005 to July 2008.

Patients and methods: The study was conducted in Department of Hepatogastroenterology, Internal Medical Clinic in the General Hospital “Sveti Duh”, Zagreb, Croatia between March 2005 and July 2008. Consecutive patients of either sex and at least of 18 years of age from those referred to Endoscopy Services for diagnostic upper-gastrointestinal endoscopy for evaluation of dyspeptic symptoms, and found to suffer from non-ulcer dyspepsia and concomitant H. pylori infection.

Participants were not previously treated against H. pylori.

H. pylori strains were isolated from antral biopsies taken during upper endoscopy. Samples were cultured together on blood agar plates under microaerophilic conditions and all positive cultures were tested for sensitivity to clarithromycin, metronidazole, amoxycillin and moxifloxacin by the E-test using established MIC methods.

Results: Primary resistance rates to clarithromycin, metronidazole and moxifloxacin were 10.8 %, 33 % and 5.9 %. All samples proved sensitive to amoxycillin.

Conclusion: Results of our survey on the local area show the importance of determination of Helicobacter pylori in dyspeptic patients.