



شبكة المعلومات الجامعية
التوثيق الإلكتروني والميكرو فيلم

بسم الله الرحمن الرحيم



HANAA ALY



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شبكة المعلومات الجامعية التوثيق الإلكتروني والميكروفيلم



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جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها
علي هذه الأقراص المدمجة قد أعدت دون أية تغيرات



يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار



HANAA ALY

Evaluation of culture and sensitivity guided antibiotic
selection in eradication of helicobacter pylori

Thesis

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Of internal medicine

By

Hussam Ali Hussein Ali

Bachelor of Medicine and Surgery, Faculty of medicine
Cairo university

Under supervision of

Prof.Dr. Azza Emam Mohamed

Professor of internal medicine Faculty of medicine
Ain shams university

Dr. Sara Abdel Kader Nakeeb

Assistant Professor of internal medicine Faculty of
medicine

Ain shams university

Dr. Mohamed Magdy Salama

Lecturer of internal medicine Faculty of medicine

Ain shams university

Faculty of Medicine

Ain Shams University

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List of Abbreviations

ABBREVIATION	FULL TERM
WGO	World Gastroenterology Organization
AMX	Amoxicillin
CLR	Clarithromycin
PPI	Proton pump inhibitor
MTZ	Metronidazole
FLU	Fluoroquinolones
SAM	Ampicillin/Sulbactam
LF	Levofloxacin
RIF	Rifampicin
TET	Tetracycline
h. pylori	Helicobacter pylori
ALT	Alanine transaminase
AST	Aspartate transaminase
CBC	Complete Blood Count
RUT	Rapid Urease Test
NS	Non-Significant
S	Significant
HS	Highly Significant
BUN	Blood urea nitrogen
PLT	Platelets

Introduction

INTRODUCTION

H. pylori is a definite carcinogenic pathogen that affects the gastric mucosal layer and the epithelial lining of the stomach, & build up a prolonged colonization in the stomach mostly during childhood.

M.Alboraie et al.,2018

Egypt is considered one of the highest prevalence areas for H. pylori infection and higher resistance to antibiotics owing to the abuse of antibiotics. The prevalence in Egypt was 90 % in adults while 60-90% in middle east as reported by the World Gastroenterology Organization (WGO) **Hunt et al.,2011**

The preferred treatment for H. pylori infection used to be a proton pump inhibitor (PPI)-based triple therapy: PPI + amoxicillin + clarithromycin (**Chey et al.,2015**)

Metronidazole (MTZ) is used instead of amoxicillin or clarithromycin in cases of allergy or resistance. (**Stenstrom et al.,2008**)

However, with increasing clarithromycin resistance, the eradication rate achieved by this regimen has been declining with less than 80% cure rate (**MALFERTHEINER et al.,2017**).

Bismuth quadruple therapy is currently recommended as an alternative first-line treatment for H. pylori infection as it provides superior eradication with similar safety and tolerability to standard therapy (**MALFERTHEINER et al.,2017**).

For patients in areas where clarithromycin resistance is high (>_ 15 percent) bismuth-containing or concomitant non-bismuth containing quadruple therapy should be used as first-line therapy (**KIM et al., 2014**) (**MALFERTHEINER et al.,2017**).

AJM OF THE WORK

AIM OF THE WORK

The aim of the work; is to compare between **standard triple therapy** and **Antibacterial culture with susceptibility test** in successful *H. pylori* eradication.

CHAPTER 1

EPIDEMIOLOGY OF INFECTION