







July 2017

# Helicobacter pylori Testing: Current Recommendations

The purpose of this clinical update is to remind laboratory requestors of our current approach to the diagnosis of *H. pylori* infection

### The method of choice to diagnose H. pylori infection is faecal antigen testing

This monoclonal antibody-based technique detects the presence of *H. pylori* antigens in a faecal sample. It has high sensitivity and specificity for diagnosis of active infection and to confirm eradication following treatment.

#### Appropriate Clinical details are a pre-requisite for testing

• Please refer to the Pathlab clinical update from December 2016 and BPAC guidelines for further details on *H. pylori* testing criteria and red flags for endoscopy referral.

## Please note the following in order to minimise false negative results with faecal antigen testing

- Faeces need to be tested within 24 hours of collection. Therefore specimens need to be submitted well within this time-frame with the collection time clearly documented.
- Antibiotics should not be taken in the 4 weeks prior to testing. Proton pump inhibitors (PPI) and bismuth should be avoided for 2 weeks prior to testing.

#### *H. pylori* serology will only be performed for the following reasons:

- The clinical details on the form specifically state that the patient is **unable to discontinue their PPI** for 2 weeks.
- Documentation that the patient has been discussed with and approved for H. pylori serology by a Clinical Microbiologist or Gastroenterologist.

Please contact us if you have any questions with regards to the above.

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