

## *H. pylori (Helicobacter pylori infection)*

### WHAT IS HELICOBACTER PYLORI (H.PYLORI)?

This bacterium infects the lining of the stomach and thrives in the mucous environment. It is common worldwide and especially impacts the elderly, the very young, and those in Third World countries where sanitation is problematic. However, just because you have been exposed to H. pylori doesn't necessarily mean you will be affected by its presence. Often H. pylori does not cause any symptoms. Approximately 50 percent of people in the United States have it.

### HOW IS H.PYLORI INFECTION

DIAGNOSED? – Your physician can use a blood test, a breath test, or an endoscopy.

Blood Test – Your physician sends a sample of your blood to a lab to confirm if you have H. pylori

Breath Test – In this test you drink a special liquid, and in less than an hour, a sample of your breath is tested for a chemical reaction caused by H. pylori.

Endoscopy – A small tube with a camera inside is inserted through the mouth or nose, passing into the stomach to look for inflammation and ulcers. During the procedure, a biopsy, or small sample of the stomach lining, can be obtained. This biopsy will be examined under a microscope by a surgical pathologist, preferably one specializing in gastrointestinal pathology, and a diagnosis of H. pylori infection or other unexpected abnormality can be established or excluded.

### WHAT IS BARRETT'S ESOPHAGUS?

The esophagus is the muscular tube that carries food and saliva from the mouth to the stomach. Barrett's esophagus is a condition resulting from ongoing irritation of the esophagus where its normal lining is replaced by the type of lining that is normally found in the stomach. Patients with Barrett's esophagus lack symptoms that are noticeably different from gastroesophageal reflux disease (GERD), the underlying irritation in most cases.

### HOW IS BARRETT'S ESOPHAGUS DIAGNOSED?

Barrett's esophagus is discovered when physicians view the abnormal lining of the esophagus with a special instrument (endoscope) and sample a piece of tissue (biopsy) that is evaluated under a microscope by a pathologist, preferably specializing in diseases of the gastrointestinal tract.

An endoscopy procedure uses a small tube with a camera inside that is inserted through the mouth and into the esophagus allowing the physician can also take a sample, or biopsy. This biopsy will be interpreted by a surgical pathologist, preferably one with subspecialty training in gastrointestinal pathology, who can confirm the diagnosis and determine whether dysplasia, a pre-cancerous change, or cancer is present.

## Florida Digestive Specialists



EGD FAQ'S

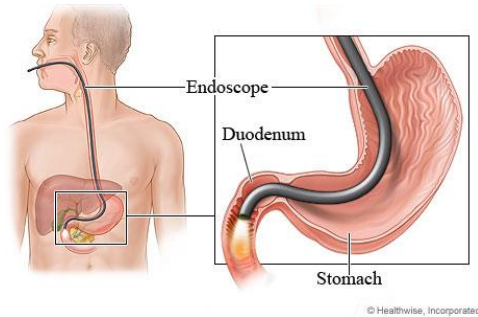
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# Upper Endoscopy



A Esophagogastroduodenoscopy (Or EGD) is a procedure that allows a gastroenterologist to view the inner lining of a patient's esophagus or stomach. The procedure is performed using a thin, flexible tube (an endoscope) that is slowly guided through the esophagus. The end of the endoscope is lighted and includes a camera that transmits images onto a screen in the procedure room.

## Frequently Asked Questions

**Q.** Where is the upper gastrointestinal tract and why is it important?

**A.** The upper gastrointestinal tract begins with the mouth and continues with the esophagus (food tube) which carries food to the stomach. The acid in the stomach churns food into small particles. The food particles then enter the duodenum, or small bowel, where bile from the liver and digestive juices from the pancreas mixes with it to help the digestive process. Both bile and enzymes are needed to digest food, so it is important to diagnose any problems as quickly as possible.

**Q.** Is any preparation necessary before the procedure?

**A.** It is important not to eat or drink anything for at least eight hours before the exam. Your physician will give you instructions about the use of regular medications, including blood thinners, before the exam. Because of the mild sedation, you are not allowed to drive, operate heavy machinery or make any important decisions for up to six hours following the exam. It's important to have someone with you to drive you home

**Q.** What happens during the EGD procedure?

**A.** First, your physician will anesthetize your throat with a spray or liquid. The endoscope is then gently inserted into the upper esophagus. The exam takes from 15 to 30 minutes, and then you are taken to the recovery area. There is no pain with the procedure and patients seldom remember much about it.

## Anti-Reflux Regimen

The following lifestyle modifications will help in relieving the discomfort of reflux:

1) Watch what you eat and drink. Avoid things that can increase stomach acid.

- Avoid acidic or high-fat foods such as citrus fruits, tomatoes, or fast-food hamburgers

- Avoid coffee, tea, alcoholic, or carbonated beverages (with or without caffeine)

- Avoid chocolate

- Avoid mints

2) Watch when you eat or drink.

- Divide your daily food intake into smaller quantities, more often (several smaller meals vs one or two huge meals)

- Don't eat late at night and don't lie down for at least an hour after eating

3) Watch your weight and your smoking habits.

- Lose weight if you are overweight

- If you smoke, quit (smoking increases stomach acid)

4) Other helpful hints.

- Avoid bending over unless you have to

- Don't wear tight belts or tight-fitting clothes

- Raise the head of your bed 6-10 inches by placing blocks or books under the legs. Lying flat lets acid reflux back up into the esophagus.

- Take any medication your physician has prescribed for your condition.

- Check with your physician before taking aspirin or anti-inflammatory medications such as ibuprofen, they can make reflux symptoms worse.