ORIGINAL ARTICLE

Migrant communities constitute a possible target population for primary prevention of *Helicobacter pylori*-related complications in low incidence countries

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Abstract:
Objective. Pre-selection of individuals with epidemiological risk factors for *Helicobacter pylori* infection and atrophic gastritis could increase the efficiency of serologic screening to prevent peptic ulcer disease and gastric cancer in Western countries. The aim of this study was to determine the prevalence of and risk factors for *H. pylori* infection and atrophic gastritis in a migrant community in The Netherlands. Material and methods. Inhabitants from an urban district in Rotterdam, The Netherlands with a large proportion of immigrants were randomly selected. Information was collected on demographic factors, socioeconomic status, lifestyle, history of dyspeptic symptoms and medication use. In addition, serologic *H. pylori* and *CagA* status and the presence of atrophic gastritis were evaluated. Results. In total, 288 subjects were included. Surinamese or Antillean, Turkish, Cape Verdean, and Moroccan subjects were *H. pylori*-infected in 63%, 82%, 86% and 96% of cases, respectively, whereas the infection rate in Dutch subjects was 46% (all *p* < 0.05). Within multivariate logistic regression analysis, ethnicity and number of persons in a household were identified as independent risk factors for *H. pylori* infection. In addition, mean pepsinogen I level and pepsinogen I/I ratio were significantly lower in subjects of non-Dutch origin as compared to Dutch subjects (both *p* < 0.001). No Dutch subjects suffered from atrophic gastritis, as compared with 12 subjects of non-Dutch origin (*p* = 0.13). Conclusions. The prevalence of *H. pylori* is high in migrant populations in The Netherlands. Furthermore, markers of atrophic gastritis are increased in subjects of foreign origin. Therefore, these migrant communities may constitute a target group for serologic screening to prevent *H. pylori*-related complications in Western countries.

Key Words: Atrophic gastritis, gastric cancer, *Helicobacter pylori*, peptic ulcer, primary prevention, screening