

'Serological Biopsy' in First-Degree Relatives of Patients with Gastric Cancer Affected by *Helicobacter pylori* Infection

F. Di Mario, A. M. Moussa, P. Caruana, R. Merli, L. G. Cavallaro, G. M. Cavestro, N. Dal Bò, V. Iori, A. Pilotto, G. Leandro, A. Franzè & M. Rugge
Dept. of Clinical Science, University of Parma, Parma, Italy; Geriatrics Unit, Casa Sollievo della Sofferenza, IRCCS, San Giovanni Rotondo, Italy; Gastroenterology Unit, Castellana Grotte, Italy; Gastroenterology and Endoscopy Unit, University of Padova, Italy

Di Mario F, Moussa AM, Caruana P, Merli R, Cavallaro LG, Cavestro GM, Dal Bò N, Iori V, Pilotto A, Leandro G, Franzè A, Rugge M. 'Serological biopsy' in first-degree relatives of patients with gastric cancer affected by *Helicobacter pylori* infection. *Scand J Gastroenterol* 2003;28:1223-1227.

Background: Relatives of patients with gastric cancer are at increased risk of developing this disease, especially if they are infected by *Helicobacter pylori*. Moreover, *H. pylori*-related atrophic gastritis and hypochlorhydria are well-documented risk factors for noncardia gastric cancer. Serum pepsinogen I (sPGI) and II (sPGII) levels are low in this condition. The aim of our study was to assess by means of a 'Gastropanel' blood test, including sPGI, sPGII, gastrin-17 (G-17) and antibodies anti-*H. pylori* (IgG-Hp), both functional and morphological features of gastric mucosa in *Hp + ve* subjects with a family history of gastric cancer. **Materials and Methods:** Twenty-five *Hp + ve* subjects consecutively referred to our department for gastrointestinal complaints, selected as first-degree relatives of patients suffering from gastric cancer, were enrolled in the study and then matched for sex and age with 25 dyspeptic and *Hp + ve* subjects with no family history of gastric neoplasia. Blood samples were taken for determination of gastropanel in all patients; in addition, antibodies against CagA were analysed. **Results:** No statistically significant differences were detected between the two groups as regards alcohol consumption, coffee intake and smoking habits. Mean sPGI levels in Group A ($83.4 \pm 58.4 \mu\text{g/L}$) were significantly lower than those in Group B ($s\text{PGI } 159.5 \pm 80.6 \mu\text{g/L}$; $P < 0.0001$) as well as sPGII ($12.5 \mu\text{g/L} \pm 6.24$ versus $20.6 \pm 58 \mu\text{g/L}$; $P < 0.006$). No statistical difference was found between the two groups in relation to G-17 levels, IgG-Hp titres and antibodies against CagA. **Conclusion:** First-degree relatives of patients with noncardia gastric cancer affected by *H. pylori* infection present lower sPGI and sPGII levels, possibly due to the increased frequency of atrophic lesions in these patients.

Key words: Family relatives; gastric cancer; *H. pylori*; serum pepsinogens

Francesco Di Mario, Università degli Studi di Parma, Dipartimento di Scienze Cliniche, Cattedra di Gastroenterologia, Via Gramsci 14, IT-43100 Parma, Italy (fax. +39 0521 291582, e-mail. francesco.dimario@unipr.it)