

Date: 30/11/2016

FREEDOM OF INFORMATION REQUEST FOI/013097 – Helicobacter pylori infections

1. Your policy for the identification and screening for Helicobacter Pylori infections

We use the Trust Dyspepsia Guideline for gastroscopy management: if the following are identified on gastroscopy (OGD) – Peptic Ulcer disease, or non-ulcer dyspepsia – QUT testing for H.Pylori is undertaken.

The Endoscopy Unit also runs Breath test clinics every Friday, and takes GP referrals, for patients who do not require a gastroscope at this time.

(We have a Trust ratified Guideline for the Gastroscopy Management of Dyspepsia, and this is supported by the NICE (2004). Dyspepsia: Managing dyspepsia in adults in primary care.)

2. Your procedure for GP referral for patients presenting with gastritis. In particular:

Paper based referral, vetted by Gastro Consultants - booked for OGD if applicable, or may be booked for breath tests

3. The total number of gastroscopic investigations carried out over the most recent 12 month period for which you have data

The unisoft data has recorded a total of 4,862 Gastrosopes (OGD) performed from 11/11/15 for 12 months.

4. The number Campylobacter-like organism (CLO) tests carried out during gastroscopy in the same period. These may also be referred to as Rapid Urease Tests (RUT)

The unisoft data has recorded 1,390 CLO tests performed from 11/11/15 for 12 months.

5. The number of stool antigen tests requested by you for the diagnosis of Hp infection in the same period (if applicable)

Not applicable

6. The number of urea breath tests (C13 or C14) carried out by you in the same period (if applicable)

12 months from November 2015 – 11th November 2016 – C13 TESTS - 928 Breath Tests booked / 770 Breath Tests performed and 158 DNA .

7. The number of patients treated for H Pylori infections in the same period.

No data available