



Helicobacter pylori gastritis--epidemiology.

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Abstract: The acquisition of *Helicobacter pylori* is the main cause of chronic gastritis in humans. In Europe, a small proportion (less than 1%) of gastritis cases are caused by *H. Heilmannii*, and somewhat more (5%) are autoimmune in origin, in which condition *H. pylori* may not probably play a role. Recent findings on chronic gastritis and *H. pylori* acquisition in developed countries can be summarized as: (1) *H. pylori* gastritis is acquired in childhood and adolescence (age less than 20) in more than 50% of cases; (2) the risk and rate of acquisition is highest in early childhood, after which the rate exponentially declines; (3) new infections occur in adulthood but are quite rare (annual incidence 0.4%, on average, in Finland); (4) *H. pylori* gastritis is a birth cohort-related phenomenon; i.e., different cohorts show a rate and prevalence of *H. pylori* gastritis that varies between cohorts; (5) the rate and risk of *H. pylori* infection is high in cohorts born in the beginning of the century, but is much lower in those born later; (6) this decline is due to a decrease in the rate and risk of *H. pylori* acquisition in childhood in particular. *H. pylori* gastritis-related complications, such as peptic ulcer diseases and gastric cancer, show epidemiological features similar to *H. pylori* gastritis. Both peptic ulcer and gastric cancer have declined in incidence over time. Gastric cancer is a birth-cohort phenomenon in the same way as is *H. pylori* gastritis, and the incidence of gastric cancer shows a positive but exponential relationship with the "birth-cohort-specific" prevalence of gastritis in the general population.

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