COMMUNITY-DRIVEN RESEARCH ON HELICOBACTER PYLORI INFECTION IN A CANADIAN ARCTIC HAMLET

K. J. Goodman, R. Munday, J. Huntington, J. Cheung, S. van Zanten, A. Corriveau

CAN Help Working Group. University of Alberta, Northwest Territories Health and Social Services

In recent years, the health committee of the predominantly aboriginal hamlet of Aklavik, Northwest Territories (population ~600) identified H pylori infection and its link to gastric cancer as a priority concern and advocated for research to address solutions. The resulting Aklavik H pylori Project is the start of a broader collaboration to investigate H pylori infection in northern Canadian populations where gastric cancer rates are elevated and H pylori infection is difficult to treat. This research involves community members in planning and aims to describe sociodemographic patterns of H pylori infection and the associated burden of disease, identify effective treatment regimens, generate evidence to inform local health care policy, and address community concerns regarding health risks. The present results pertain to community participation and initial screening by the 13C-urea breath test. Between November 2007 and December 2008, informed consent and clinical survey data were obtained from 314 Aklavik residents; 308 had a breath test; 205 consented to upper gastrointestinal endoscopy and 197 attempted the procedure, with biopsies for culture and histopathology obtained from 193. Breath-test positivity was 58% and the reporting of this finding to the community served as a strong catalyst for further participation. The high level of community participation in this project coupled with the interest of health authorities has generated media attention which has led to other communities asking to be included. This ongoing community-driven project will seek effective strategies for addressing emerging community concerns in populations where H pylori infection is difficult to treat.

Contact Karen Goodman (kgoodman@ualberta.ca)