**Helicobacter pylori** cagE is not associated with clinical outcomes in the Kurdistan region of Iraq

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Dear Editor,

We have read with interest the article entitled “cagE as a biomarker of the pathogenicity of Helicobacter pylori” by Ramis et al.1. In this study, with a sample size of 57, the authors suggested that cagE is an important prognostic indicator for developing lesions during Helicobacter pylori infection. This suggestion was based on the fact that a statistically significant association was found between cagE and gastric erosion, but not between cagA and gastric erosion.

With reference to this study, we conducted a study in the Kurdistan region of Iraq to examine relationships between H. pylori virulence factors and clinical outcomes. Antral Biopsies were collected from 105 patients visiting the Endoscopy Department at the Azadi Teaching Hospital for diagnostic upper gastric endoscopy. Deoxyribonucleic acid (DNA) was extracted directly from the biopsy samples, and the presence of H. pylori was confirmed by polymerase chain reaction (PCR) amplification of the ureA gene. We amplified the cagA, cagE, vacAs1/m1, vacA, iceA1, iceA2, and babA2 genes and found a statistically significant association between cagA and gastric and duodenal ulcerations (p = 0.005), but no statistically significant association between cagE and gastric and duodenal ulcerations (p = 0.659). In addition, no association was found between other genes and clinical outcomes.

The author declare that there is no conflict of interest.

REFERENCES