inal findings in diabetic

## outpatients at Kenyatta National Hospital, Nairobi

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## **Abstract:**

OBJECTIVE: To determine the prevalence of H. pylori and the associated upper gastrointestinal endoscopic lesions in diabetic outpatients with dyspepsia. DESIGN: Cross-sectional study. SETTING: Kenyatta National Hospital (KNH), Nairobi, Kenya. SUBJECTS: Adult diabetic outpatients with dyspepsia attending the KNH diabetic clinic. RESULTS: Of the 257 randomly selected diabetic outpatients screened, 137 (53.3%) had dyspepsia. Seventy one of these patients underwent an upper gastrointestinal endoscopy. Fifty five (77.5%) of the 71 patients had H.pylori infection identified by rapid urease test and histology. The prevalence of H. pylori increased with HbA1c level but there was no statistically significant association with poor glycaemic control (HbA1c >7.0%). Forty eight (67.6%) of the 71 had gastritis, 17 (25.7%) had duodenitis, eight (11.3%) had oesophageal candidiasis, seven (9.9%) had bile reflux, six (8.5%) had reflux oesophagitis, six (8.5%) had ulcers (five duodenal, one gastric) and one (1.4%) had gastric cancer. Fourteen (19%) had endoscopically normal mucosa. The prevalence of H. pylori was 82.3% (32/38) in patients with antral gastritis. All ulcers and the cancer lesion (adenocarcinoma) were associated with H. pylori. Histological gastritis was found in 57 (81.8%) and was significantly associated with H. pylori. CONCLUSION: Although dyspepsia is common in diabetic outpatients at KNH, endoscopic findings and H. pylori status are not significantly different from those of non-diabetic population.