The frequency and type of histological gastric changes in patients with functional dyspepsia.

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INTRODUCTION

Though the symptoms of functional dyspepsia (FD) are not considered to correlate with mucosa changes the histopathological evaluation seems to be fundamental not to miss the early onset of atrophic-metaplastic transformation.

AIMS & METHODS

The aim was to assess the frequency and type of histological changes in patients with functional dyspepsia.

Adult patients (18 - 65 years) with confirmed diagnosis of FD due to Rome III criteria (2006) were eligible to participate.

Biopsy specimens were taken from stomach due to the Houston-updated gastric biopsy sampling protocol for the next histological examination. One expert gastrointestinal pathologist, blinded to all patient clinical but not endoscopic information, assessed all tissue samples.

The degree of inflammatory changes was scored due to 4-grade Visual Analogue Scale, atrophy - due to Operative Link for Gastritis Assessment (OLGA) and metaplasia - due to Operative Link on Gastric Intestinal Metaplasia (OLGIM) staging systems.

All patients were tested for H. pylori using two methods (rapid urease test and by morphological examination).

RESULTS

75 patients fulfilled all criteria and were included into the study. Mean age was 40.3±3.9; males - 26 (34.7%). H. pylori was detected in all 75 patients, mostly in antral part.

All patients had mainly a mild degree of mucosal inflammation (84%) which in most cases was limited to antral part.

Atrophy was more frequently diagnosed in antrum (64.0%) than in corpus (12.0%) (p<0.0001) and in all cases didn’t exceed OLGA stage I.

Metaplasia of intestinal type was found in 26 (34.7%) patients in antral part and was not detected in corpus (p<0.0001). No case of dysplasia was detected.

CONCLUSION

As in most studies, we also didn’t find the correlation between stage and degree of gastritis and clinical symptoms of FD. But we shouldn’t forget about possible microscopic changes of mucosa when dealing with “functional” patients, thus conducting a primary prophylaxis of gastric cancer.