Dear Colleague

**GP DIRECT ACCESS HELICOBACTER PYLORI TESTING**

As part of our Gastroenterology Elective Care Reform, a regional roll-out of the **STOOL ANTIGEN TEST (SAT)** for *H. pylori* has commenced. This is to replace the more commonly used urea breath test (UBT). The SAT is comparable in accuracy to the UBT but has the additional benefits of being more cost effective and time saving for GPs. Furthermore the SAT does not rely on the patient to accurately perform the test.

While the urea breath test was initially felt to be the most accurate test post eradication, the European Helicobacter Study Group Guidelines (2012) now recommend that both tests have equivalent diagnostic accuracy. As with many other areas of the UK we have decided to adopt the SAT as the **H. Pylori test of choice** and this has been endorsed by the NI Public Health Agency.

Roll out across the various Local Commissioning Group (LCG) areas is timetabled as follows:

<table>
<thead>
<tr>
<th>LCG area</th>
<th>Date of implementation</th>
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<tbody>
<tr>
<td>Western</td>
<td>21&lt;sup&gt;st&lt;/sup&gt; January 2019</td>
</tr>
<tr>
<td>Northern</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; April 2019</td>
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<tr>
<td>Southern</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; April 2019</td>
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<tr>
<td>South Eastern</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; October 2019</td>
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<td>Belfast</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; October 2019</td>
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In line with NICE guidance and after exclusion of red flags, we would encourage GPs to **ONLY** test for *H. pylori* when indicated. This guidance is outlined in the excerpt below taken from the Quick Reference Guide of the Public Health England (PHE) document ‘*Test and treat for
**Helicobacter pylori (HP) in dyspepsia** - ‘When should I test for Helicobacter Pylori’:

**Routine re-testing after eradication is not usually necessary.**
Indications for re-testing are laid out in the attached PHE guidance and should be followed closely:

Patient *H. pylori* faecal antigen samples will be collected in the usual way from the practice along with other laboratory samples. Sample requirements as determined by the pathology laboratory are outlined in Appendix 1.

**ACTION FOR GPs**
- Ensure there is no further prescribing of *H. Pylori* breath tests once the SAT becomes available in your area (see above table). Prescribing data will be monitored by your local Pharmacy Adviser.
- Cascade this information to all relevant staff including GP locums, practice based pharmacists and treatment room staff.
- Follow the PHE document ‘Test and treat for Helicobacter pylori (HP) in dyspepsia’.

We would hope that appropriate use of this test will lead to better management of patients presenting with uncomplicated dyspepsia with a reduction in unnecessary invasive endoscopy procedures.

If you have any queries please contact Ciaran.Byrne@hscni.net in the first instance.

Yours sincerely

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Head of Pharmacy and Medicines Management

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   Raymond Gamble
   Dr Brian Hunter
**Appendix 1**

**GP Direct Access to Helicobacter pylori faecal antigen testing**

**Sample requirements**
For this test patients are required to provide a stool sample.

Prior to sampling patients should not have taken:
- Any antibiotics for at least 4 weeks,
- Proton pump inhibitors (PPI) or H2-receptor antagonists for at least 2 weeks.

Stools may be collected in a clean bedpan and must not be contaminated with urine, residual soap or disinfectant. A portion of the stool should be transferred into a sterile faeces container using the spoon attached to the lid. Enough material to fill one third of a sterile specimen pot is required. Specimens should be refrigerated (between 2° and 8°C) while awaiting transport to the laboratory and must be received by the testing laboratory within 48 hours of production.

Samples can be transported via your routine laboratory collection. To reduce the risk of sample degradation due to transport delay we recommend that samples only be taken Monday to Wednesday. The assay is performed as a batch test currently once per week but this frequency will be increase with sample numbers.

When requesting this test please complete your standard microbiology request form making a single test request for *H. pylori* faecal antigen.

To comply with Ulster Hospital laboratory acceptance criteria please make sure that the patient’s name, DOB, H&C number, the sample date and time are recorded on both the sample container and the request form.

**Test Results**

The *H. pylori* faecal antigen test is a qualitative assay and the results will be reported as **positive**, **negative** or **equivocal**. As with all laboratory tests clinicians should consider the patient’s clinical history and results before making a final diagnosis.

Inability to detect *H. pylori* antigens in a patient’s faecal samples may not preclude disease but may be caused by other factors such as incorrect sampling, handling or storage of stools.

Results will be returned to GP requestors via the GP Links programme. These results will also be available on the NIECR system.

**Contact details**

Pathology clinical and laboratory advice is available via the Ulster Hospital Microbiology laboratory, telephone number 028 9041 1701.