SUMMARY

INTRODUCTION: Dyspepsia, a common disorder in general practice, refers to pain or discomfort centered in the upper abdomen. Dyspepsia may indicate the presence of serious disease, such as peptic ulcer or gastric cancer. The discovery of *Helicobacter pylori* has resulted in important advances in the management of dyspepsia. Since diagnostic procedures are conducted in only a minority of dyspeptic patients in primary care, management of dyspepsia usually involves treatment, with emphasis on organic disorders, e.g. peptic ulcer disease (PUD) and infection with *Helicobacter pylori*. Some general practice patients with dyspepsia, however, suffer from non-ulcer disease, so-called idiopathic or functional dyspepsia in which no definite structural or biochemical explanation for the symptoms can be identified. Medication is often prescribed for dyspepsia in primary care, although the effectiveness of medication in functional dyspepsia is questionable because of the variable but generally high response to placebo.

AIMS AND OBJECTIVES: This study aimed at determining the prevalence of dyspepsia and assessed its various risk factors namely, age, gender, stress, alcohol, cigarette smoking, ingestion of coffee, *Helicobacter pylori* infection, socio-economic class and non-steroidal anti-inflammatory drugs.

METHODOLOGY: A cross sectional descriptive study of 418 adult patients attending the General Out-Patient Department of the University of Port Harcourt Teaching Hospital was carried out between July 1\textsuperscript{st} and August 31\textsuperscript{st} 2009. An informed consent was obtained before each subject was interviewed using a questionnaire and blood taken to detect the presence of *Helicobacter pylori* infection. They were also examined for signs that determine the health impact of dyspepsia before they were sent to the laboratory for P.C.V estimation and stool analysis for detection of occult
blood. Approval was obtained from the Ethical Committee of the University of Port Harcourt Teaching Hospital before the study was carried out.

RESULTS: Four hundred and eighteen (418) persons consisting of 168 (40.2%) males and 250 (59.8%) females were selected through systematic sampling. The subjects were adults aged from 18 upwards with a mean age of 33.7 years (standard deviation of ±2). Among the 418 recruited participants, 187 (44.7%) had dyspepsia while the remaining 231 (55.3%) did not have dyspepsia. In this study, dyspepsia was commonest among the females 119(63.6%)(Fig.2), in the 21-30 years age group (Tab.3), in the low socio-economic class 87(46.5%)(Tab.5) and those that ingested non-steroidal anti-inflammatory drugs(Tab.14). Dyspepsia was significantly associated with the intake of coffee, alcohol, stress, P.C.V of ≥ 30% and a positive faecal occult blood result. The prevalence of dyspepsia in this study was 44.7%. Out of the 187 dyspeptics in this study, 80 had uncomplicated dyspepsia, 57 had dyspepsia with alarm features, while 50 had functional dyspepsia.

CONCLUSION: The prevalence of dyspepsia is high among patients attending the General Out-Patient department of the University of Port Harcourt Teaching Hospital. Factors associated with dyspepsia in Port Harcourt include, stress, alcohol, coffee, P.C.V of ≥ 30% and a positive stool occult blood test.