

Stress ups risk of peptic ulcer regardless of *H. pylori* status

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per-point odds ratio for the stress index (1.19); it was reduced after adjustment for socioeconomic status (1.17) and further reduced after adjustments for smoking, nonsteroidal anti-inflammatory drug use, and lack of exercise (1.11). Independent predictors of ulcer included stress, socioeconomic status, smoking, *H. pylori* infection, and nonsteroidal anti-inflammatory drug use.

"Psychological stress increased the incidence of peptic ulcer, in part by influencing health risk behaviors," the authors write.

More information: [Abstract](#)
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(HealthDay)—Psychological stress correlates with increased risk of peptic ulcer, with similar effects associated with *Helicobacter pylori* infection and ulcers unrelated to either *H. pylori* or use of nonsteroidal anti-inflammatory drugs, according to a study published in the March issue of *Clinical Gastroenterology and Hepatology*.

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Susan Levenstein, M.D., from Aventino Medical Group in Rome, and colleagues examined whether [psychological stress](#) contributes to the development of [peptic ulcers](#). Blood samples and psychological, social, behavioral, and medical data were collected from a population-based sample of 3,379 Danish adults without a history of peptic ulcer in 1982-1983. The researchers re-interviewed surviving eligible participants in 1987-1988 (2,809 participants) and in 1993-1994 (2,410 participants).

The researchers found that 76 participants were diagnosed with ulcer. Ulcer incidence was significantly higher among individuals in the highest versus the lowest tertile of stress scores (3.5 versus 1.6 percent; adjusted odds ratio, 2.2). Adjustment for the presence of immunoglobulin G antibodies against *H. pylori* in stored sera, alcohol consumption, or sleep duration did not affect the

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