

A method that breathes simplicity,
precision and painlessness



Diabact® UBT for the diagnosis of *Helicobacter pylori*



The golden standard

Helicobacter pylori is extremely common in humans, infecting around 50 % of the world's population. It is recognized as the main etiological factor for chronic gastritis, peptic ulcer and also gastric cancer. Much suffering and even ulcer related deaths can be easily prevented through accurate diagnosis and appropriate treatment with antibiotics.

Urea Breath Test (UBT) is considered to be the gold standard for the diagnosis of *Helicobacter pylori*. It is non-invasive and it measures active infection.

Diabact® UBT

RAPID RELIABLE RESULTS



A cost effective and easy to use Urea Breath Test

*Diabact® UBT is perfectly suited for primary diagnosis and for post treatment follow-up of *Helicobacter pylori* infection. It is reliable, safe and cost-effective.*

Diabact® UBT

A method with unique advantages

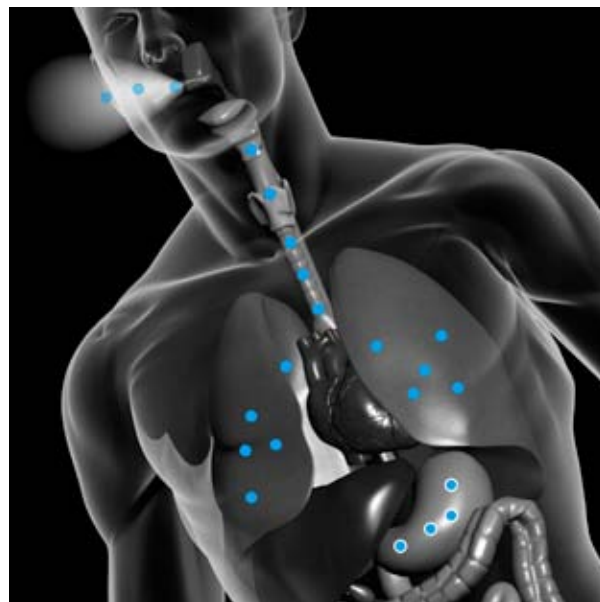
- Convenience – Easy to handle, no test preparation, just swallow a tablet
- Comfort – Painless, no invasive gastroscopic tubing
- Speed – Samples are ready for analysis in only 10 minutes
- Reliability – Sensitivity 99 %, specificity 100 %

The most reliable test is also the easiest to perform

Diabact® UBT is easy for both patients and healthcare providers. No special equipment, training or experience is required. The package contains everything needed to quickly capture a dependable sample and send it to the laboratory for analysis.

The advantage of solid tablet formulation

Diabact® UBT solid tablet formulation minimizes false positive results in early breath samples by eliminating urea hydrolysis in the mouth and on the way to the stomach. In addition there is no need for a test preparation or a test-meal.



How Diabact® UBT works in the patient

- On an empty stomach, a breath sample is taken prior to administering the 50 mg Diabact® UBT tablet
- When the tablet containing the non-radioactive ^{13}C isotope-labeled urea is swallowed, it disintegrates almost immediately in the stomach and the ^{13}C urea is dissolved.
- In the presence of *Helicobacter pylori*, the ^{13}C urea is metabolized into carbon dioxide and ammonia by the enzyme urease, produced by *Helicobacter pylori*.
- The available ^{13}C isotopes, now in the form of $^{13}\text{C}\text{CO}_2$, diffuse into the blood to be transported to the lungs, where it is exhaled in the breath to be captured during sampling. An increased ratio of ^{13}C offers conclusive proof that the patient has *Helicobacter pylori* in the stomach.
- In the absence of *Helicobacter pylori*, the administered urea is absorbed from the gastrointestinal tract and subsequently voided.

Diabact® UBT – Simply breathe, swallow and breathe



1) Breathe into base line tubes



2) Swallow Diabact® UBT tablet



3) After a 10-minute wait, breathe into sample tubes



4) Place the tubes in the box and send for analysis

References:

1. The European *Helicobacter pylori* Study Group (EHPG). Current concepts in the management of *Helicobacter pylori* infection – The Maastricht 2-2000 Consensus Report.
2. The European *Helicobacter pylori* Study Group (EHPG). Guidelines for the Management of *Helicobacter Pylori* infection – The Maastricht 3-2005 Consensus Report.
3. Ken McKoll et al. Current opinion in Gastroenterology 2000, 16 (suppl) pp. 29-32.
4. Wong et al. A rapid release 50 mg tablet-based ^{13}C -urea breath test for the diagnosis of *Helicobacter pylori* infection.
5. Gatta et al. A rapid, low-dose ^{13}C -urea breath test for the detection of *Helicobacter pylori* infection before and after treatment.