



*Focus on gastroenterology*

## Inflammatory bowel diseases (IBD)



The chronic inflammatory bowel diseases (or IBD) affects several million people in the world of which almost 2.5 million only in Europe. The age group affected is between 20 and 40 years. The IBD are not dictated by hereditary characteristics but, in general, are strongly influenced by the habits (food) in the life of every day, which is why the average age at which the disease can present is reducing more and more. The most frequent chronic diseases are Crohn's disease and ulcerative colitis. These two in particular are autoimmune diseases and determine the attack of the intestinal mucosa. They have a wide range of symptoms in terms of severity, the expression of which can reach to severe disabling. The symptoms are confused with the more ordinary and unspecific gastrointestinal disorders and very often diagnosed as a symptom of a simple type of bacterial infection, viral infection or parasites like Giardia or Cryptosporidium. **A specific diagnosis changes inevitably the quality of life of the patient.**

### Quicksark specific markers for the IBDs

- Fecal Calprotectin
- Fecal Lactoferrin
- Fecal Transferrin
- FOBT

### To be associated to infectious markers like:

- Escherichia coli
- Helicobacter pylori

**Rapid:** results in **3 to 5 minutes**

**Easy:** only a few of drops of **stool** sample needed

**Accurate:** reproducibility e sensitivity at **state of the art**

## Colon rectal and stomach cancer

Of the many types of gastrointestinal cancers, the most important is the colorectal cancer (CRC). The colorectal cancer is the third most common cancer in the world. With a number of annual deaths of approximately 610,000. Colon cancer is at the second place for cancer mortality for the men and third place for the women. The higher incidence is between the fifth and seventh decade of life. The exact causes of this cancer are still not well understood, however, the genetic component is predominant. The appearance of occult blood in the stool sample is often associated with gastrointestinal disease that may lead to cancer of the colon and the rectum, this makes the FOBT test a choice for screening, but it is associated with other markers of the new generation. Another very important issue is the cancer of the stomach and duodenal tract. The role of infection by *H. pylori*. among the events that follow the evolution gastric cancer is emphasized by the importance assigned to it by the International Agency for Research on Cancer (IARC) that has classified it as "Group I carcinogen." The association of the microorganism with precancerous and cancerous lesions (ie, they tend to move towards cancer) is very high, in fact it reaches in some cases up to 100%. The involvement of the *H. pylori* Antigen in the induction of gastric cancer is confirmed by data such as the presence of the CagA protein.



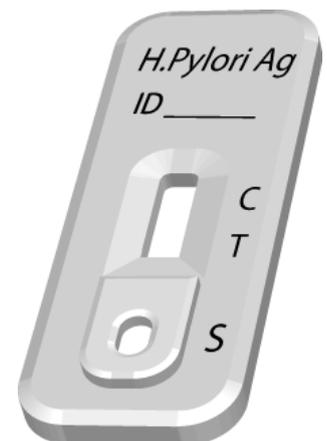
## Quickspark specific markers for gastrointestinal cancers

- FOBT
- Emoglobina fecale
- Transferrina fecale
- *H. pylori* antigene

**Simple:** visual **Lateral Flow** technology

**Rapid:** results in **10 minutes**

**Sensitive:** **12.5 µg of Hb** for FOBT and **94,0%** of clinical sensitivity for *H. pylori* Ag



***Stool sample: a complete range of fecal tests***

<b>Ref. Code</b>	<b>Product name</b>	<b>No. of test</b>
RTGA001	Fecal Calprotectin	25
RTGA004	Fecal Lactoferrin	25
RTGA006	Fecal Transferrin	25
RTGA005	Fecal Hb&Tf	20
RTTM001	FOBT	25
RTBA003	Escherichia coli	25
RTBA002	H. pylori Ag	25
RTBA023	Clostridium diffic. GDH	10
RTBA011	V. cholera 01	25
RTBA012	V. cholera 0139	25
RTVI001	Adenovirus	25
RTVI002	Rotavirus	25
RTVI009	Norovirus	25
RTPA005	Cryptosporidium parvum	30
RTPA008	Giardia lambia	30

***Stool sample: fecal ova/parasites concentrator***

<b>Ref Code</b>	<b>Product name</b>	<b>No.</b>
RTPA007	Fecal ova/parasite conc.	25

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