Helicobacter Pylori, previously named Campylobacter pylori, is a Gram-negative, microaerophilic bacterium found in the stomach. It was identified in 1982 by Barry Marshall and Robin Warren, who found it present in patients with chronic gastritis and gastric ulcers, conditions that were not previously believed to have a microbial cause. H. pylori's helix shape (from which the generic name is derived) is thought to have evolved to penetrate the mucoid lining of the stomach.

More than 50% of the world's population harbor H. pylori in their upper gastrointestinal tract. However, over 80 percent of individuals infected with the bacterium are asymptomatic and it has been postulated that it may play an important role in the natural stomach ecology. The consensus statement was that patients with peptic ulcer disease (PUD) and H. pylori infection require eradication of H. pylori and antisecretory drugs whether on first presentation or on recurrence of the disease whereas in patients with non-ulcer dyspepsia (NUD) with H. pylori infection and the relationship between H. pylori infection and gastric cancers required further exploration.

In this special issue, we are going to invite front-line researchers and authors to submit original research and review articles that explore helicobacter pylori infection and upper gastrointestinal disorders.

Before submission authors should carefully read over the journal’s Author Guidelines, which are located at Authors' Guidelines. Prospective authors should submit an electronic copy of their complete manuscript through the journal Manuscript Tracking System at Paper Submission System.

Please kindly notice that the “Special Issue” under your manuscript title is supposed to be specified and the research field “Special Issue- Helicobacter Pylori Infection and Upper Gastrointestinal Disorders” should be chosen during your submission.

According to the following timetable:
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**Guest Editor:**

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