



## Comment on "The relationship of recurrent aphthous stomatitis and *Helicobacter pylori*, cytokine gene polymorphism and cobalamin"

To the Editor,

We read with attention the article by Yakar et al. (1) about the relationship between recurrent aphthous stomatitis (RAS) and *Helicobacter pylori*, cytokine gene polymorphism, and cobalamin. In this paper, they evaluated the relationship between *H. pylori* infection, cytokine gene polymorphism, and serum cobalamin level in patients with and without RAS. We examined the article in detail. We particularly emphasize the statistical errors that can be explained by the authors. The prevalence of *H. pylori* infection varies according to age and body mass index; therefore, an interaction may be present between them (2,3). Additionally, several studies have also claimed that there is a significant interaction between cobalamin, RAS, and *H. pylori* infection (4,5).

Yakar et al. (1) reported that there was a statistically significant difference between the RAS and non-RAS groups in terms of age. We think that the age differences can influence the *H. pylori* infection analyses between the two groups. It should be interpreted after multivariate analysis (such as logistic regression) and age-related adjustment results. To claim that there is a statistically significant difference with respect to *H. pylori* infection between the RAS and non-RAS groups, performing multivariate analysis is required.

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*Turkish Journal of Gastroenterology editorial staff reached out to Yakar et al. but could not receive their response to this letter yet.*

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