

A *Helicobacter pylori* Restriction Endonuclease-replacing Gene, *hrgA*, Is Associated with Gastric Cancer in Asian Strains¹

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ABSTRACT

The sensitivity of *Helicobacter pylori* chromosomal DNA to *MboI* digestion was investigated in 208 strains from several continents. Only 11 (5%) of strains were sensitive to *MboI*, and it was hypothesized that *HpyIII*, a type II restriction/modification enzyme with sequence homology to *MboI*, mediated the protection. This was confirmed by PCR analysis of the gene locus of *hpyIII*, normally composed of *hpyIIIR* and *hpyIIIM*. In all but one strain sensitive to *MboI*, no PCR product of *hpyIIIR* was obtained. In contrast, all strains yielded a product for *hpyIIIM*, independent of *MboI* phenotype. Further examination of the *hpyIII* locus in strains lacking a *hpyIIIR* PCR product identified a novel gene, *hrgA*, upstream of *hpyIIIM*. All 208 strains examined had either *hpyIIIR* or *hrgA*, but not both, upstream of *hpyIIIM*. Although *hrgA* has homology with a *Campylobacter jejuni* gene (*Cj1602*), its function is not known. In Western countries, *hrgA* was more prevalent (53%) than in Asia (25%; $P < 0.0001$, χ^2). In Asia, *hrgA* was more prevalent among gastric cancer patients (18 of 43; 42%) than among noncancer patients (16 of 95; 17%; $P = 0.001$, χ^2). All 143 Asian strains tested were *cagA*⁺, but among Western strains, *hrgA* was more prevalent in *cagA*⁺ strains (26 of 42; 62%) than in *cagA*⁻ strains (9 of 23; 39%; $P = 0.04$, χ^2). In coculture with epithelial cells, *hpyIIIR* and *hrgA* strains did not show any significant differences in interleukin-8 induction and apoptosis. Although a direct function for *hrgA* in virulence could not be demonstrated, our data indicate that *hrgA* is a strain-specific gene that might be associated with gastric cancer among *H. pylori* isolates from Asian patients.

INTRODUCTION

Helicobacter pylori are Gram-negative bacteria that colonize the human stomach and whose presence affects the risk of upper gastrointestinal tract diseases, including gastric cancer (1). Several strain-specific factors have been identified that potentially are markers for the differential risk associated with *H. pylori* colonization; at present, *cagA*, a marker of the *cag* pathogenicity island, has the strongest predictive value (2–6). However, in East Asia, most strains are *cagA*⁺ regardless of clinical outcome (7–9). Thus, identification of bacterial factors involved in or serving as markers for the progression to ulceration or to gastric cancer remains desirable. During our study of R-M³ systems in *H. pylori*, we unexpectedly discovered such a potential marker that among Asian patients with *cagA*⁺ strains identifies those associated with gastric cancer.

H. pylori strains are highly heterogeneous in the number and nature of the type II R-M systems they carry (10–15). Type II R-M systems

comprise two enzymes encoded by paired genes, a restriction endonuclease that cleaves DNA within a specific 4–8-bp sequence and a methyltransferase that specifically methylates the DNA at adenine or cytosine residues within the same sequence and thus protects the sequence from cleavage (16–18). *H. pylori* DNA is highly methylated at both adenine and cytosine residues (10), consistent with genomic sequence analyses that predicted 14 and 15 potential R-M systems for *H. pylori* strains 26695 and J99, respectively (11, 12). The *hpyIII* R-M gene locus (13–15) is homologous to the *MboI* R-M system of *Moraxella bovis* (19), which recognizes the DNA sequence GATC, and the same recognition sequence has been confirmed for *hpyIII* (13, 14).

In a previous study (20), we showed that all *H. pylori* strains examined were resistant to *NlaIII* and that most (95%) were also resistant to *MboI*. *NlaIII* is homologous to *hpyIR*, which has been called *iceA1*, and *MboI* is homologous to *hpyIIIR*. In some *H. pylori* strains, *iceA2* replaces *iceA1*, and strains with *iceA1* have been found to be more highly associated with peptic ulcer disease (21, 22) and gastric cancer (23) than those with *iceA2*. These associations prompted us to study the *hpyIII* R-M system in more detail to determine whether there was a similar correlation with pathogenic outcomes. We assayed a collection of strains for susceptibility to *MboI*. When a small minority of strains was found to be sensitive to this restriction enzyme, they were examined to detect polymorphisms in their *hpyIII* locus. These analyses identified a new gene, *hrgA*, that had replaced *hpyIIIR* in most *MboI*-sensitive strains. For most strains investigated, the patient's clinical outcome was known, allowing investigation of correlations with *hrgA/hpyIIIR* status. Our findings suggest that *hrgA* can potentially be used as a marker for virulence in the presence of *cagA*.

MATERIALS AND METHODS

Bacterial Strains and Growth Conditions. A total of 208 clinical isolates from different parts of the world (Table 1) were from patients with duodenal ulcers ($n = 55$), gastric ulcers ($n = 42$), gastric cancer ($n = 43$), and nonulcer dyspepsia ($n = 62$). The three Colombian strains were isolated from Hispanic persons and categorized as Western strains. For six patients (five from Thailand, one from the United States), clinical data were not available. The strains were obtained from 208 unique patients. At the time of endoscopy, two biopsy specimens were obtained from the greater curvature of the antrum, between 2 and 5 cm from the pylorus. To isolate *H. pylori*, biopsies were homogenized in 250 μ l of saline, and 50 μ l were plated onto trypticase soy agar with 5% sheep blood (BBL) and incubated for up to 9 days under microaerobic conditions. Single colonies were collected, and bacteria were identified as *H. pylori* by Gram's stain morphology as well as by urease and oxidase activity. All isolates were characterized by their *cagA* status (positive, $n = 185$; negative, $n = 23$). Strain JP26, from which *hrgA* was originally isolated and sequenced, is a *H. pylori* strain obtained from a gastric cancer patient in Japan.

DNA and Protein Techniques. Standard molecular techniques were used (24). *H. pylori* chromosomal DNA was prepared from cells of each strain after 48 h of growth on two agar plates as described (25). PCR reactions were performed in reaction volumes of 50 μ l containing 0.5 units of Taq polymerase (Qiagen), 1.5 mM MgCl₂, and 200 ng of each primer. The PCR protocol (30

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³ The abbreviations used are: R-M, restriction-modification; IL, interleukin; FBS, fetal bovine serum.

Table 1 Characteristics of the 208 *H. pylori* strains studied

Origin	Clinical diagnosis ^a	<i>cagA</i> status	No. of strains
Japan (n = 85)	DU	+	20
	GU	+	25
	GCA	+	21
	NUD	+	19
Korea (n = 19)	DU	+	6
	GU	+	6
	GCA	+	7
China (n = 28)	DU	+	13
	GCA	+	15
Thailand (n = 5)	NA	+	5
India (n = 6)	DU	+	1
	NUD	+	5
United States (n = 50)	DU	+	7
		-	3
	GU	+	6
		-	1
	NUD	+	15
	-	17	
	NA	+	1
Colombia (n = 3)	GU	+	2
		-	1
Europe (n = 12)	DU	+	4
		-	1
	GU	+	1
	NUD	+	6

^a Clinical diagnosis of the patients from whom the *H. pylori* strain was isolated. DU, duodenal ulcer; GU, gastric ulcer; GCA, gastric cancer; NUD, nonulcer dyspepsia; NA, not assessed.

cycles) included a denaturing step at 94°C for 1 min, annealing at 5°C below the predicted melting temperature of the primers for 1 min, and extension at 72°C for 1 min/kb of amplification product. The primers, reflecting conserved sequences in the *hpyIII* locus, were hpRf, hpRr, hpMf, hpMr, hrgAf, hrgAr, locf, and locr (Table 2 and Fig. 1).

MboI Digestion of *H. pylori* Chromosomal DNA. Chromosomal DNA from the 208 *H. pylori* strains was subjected to digestion with *MboI* (New England Biolabs, Beverly, MA). For each reaction, 400 ng of DNA were incubated with 2.5 units of the enzyme and buffer supplied by the manufacturer for 2 h at 37°C. After incubation, digestion patterns were compared by electrophoresis on a 1.0% agarose gel.

***hrgA* Sequence.** For sequence analysis, the PCR product of JP26, generated with primers locf and locr, was purified using the QiaQuick PCR purification kit and the QiaQuick Gel Extraction kit. The purified PCR product was subsequently sequenced on both strands in an automated sequencer (Applied Biosystems, Inc.) in the New York University Cancer Center Core Laboratory and analyzed using Sequencer 3.1.1 (Gene Code Corp, Inc., Ann Arbor, MI). The accession no. was AF446009.

Disruption of *hrgA* in *H. pylori* strain 26695 or JP26. A chloramphenicol resistance gene (*cat*) was inserted in *hrgA* of JP26. A PCR fragment was first

generated from *hrgA* of strain JP26, using primers NthrgAf and XhrgAr (Table 2). This product was cloned into pBluescript, using *Escherichia coli* DH5 α . A unique *EcoRI* site was created by inverse PCR with primers hrgAinr and hrgAinf, disrupting *hrgA*. The *cat* gene of pBSC103 (26) was amplified using primers catf and catr, which added *EcoRI* restriction sites. This cassette was ligated into the inverse PCR product, thereby disrupting *hrgA*. *H. pylori* strain JP26 was transformed to chloramphenicol resistance with the pBSC103 vector containing the *hrgA* gene interrupted by *cat*, to create JP26-*hrgA::cat*. Chromosomal DNA was isolated from the transformants, and the insertion of the *cat* cassette within *hrgA* was confirmed by PCR.

AGS Cell Culture and IL-8 Assays. AGS human gastric epithelial cells (ATCC CRL 1739) were grown in RPMI 1640 (Life Technologies, Inc., Rockville, MD) supplemented with 10% FBS and 20 μ g/ml gentamicin in an atmosphere of 5% CO₂ at 37°C. For coculture experiments, *H. pylori* was grown in *Brucella* broth with 5% FBS for 48 h. Cells were harvested by

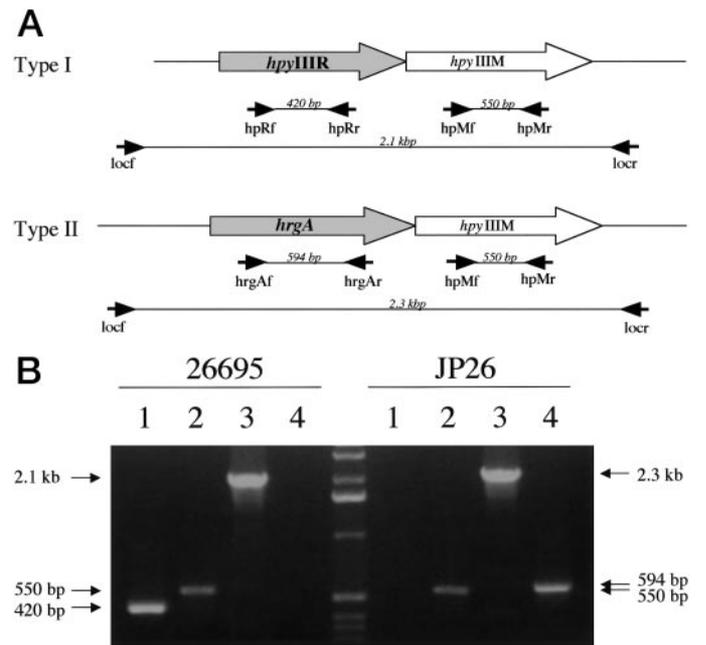


Fig. 1. A, schematic representation of the *hpyIII* R-M locus in *H. pylori* strains. Type I represents strains containing *hpyIIIR*, and Type II represents strains containing *hrgA*. PCR primers used in the analysis of these loci are indicated by black arrows, and the sizes of obtained PCR products are shown in italics. B, representative agarose gel (26695 for type I, JP26 for type II) showing the size of PCR products obtained with the primers specific for *hpyIIIR*, *hpyIIIM*, *hrgA*, and the complete locus. For both types, Lane 1, *hpyIIIR*; Lane 2, *hpyIIIM*; Lane 3, the complete locus; Lane 4, *hrgA*.

Table 2 Oligonucleotide primers used in this study

Primer designation ^a	Gene locus	Location in gene ^b	Primer sequence (5'→3') ^c
hpRf	<i>hpyIIIR</i>	226-243	CTCATTGCTGTGAGGGAT
hpRr	<i>hpyIIIR</i>	668-651	TCTTGATAGGATCTTGCG
hpMf	<i>hpyIIIM</i>	135-148	TCCGCCTTATTTC
hpMr	<i>hpyIIIM</i>	697-684	CCGCAATGCCTGTG
hrgAf	<i>hrgA</i>	252-272	TCTCGTGAAAGAGAATTTC
hrgAr	<i>hrgA</i>	933-914	TAAGTGTGGGTATATCAATC
locf	<i>HP0090</i>	17-1	AATAGCGCGTATTGCAT
locr	<i>HP0093</i>	422-438	CCCAAAAGTATAACGCT
NthrgAf	<i>hrgA</i>	252-272	ATAAGAATGCGGCCGCTCTCGTGAAAGAGAATTTC
XhrgAr	<i>hrgA</i>	933-914	CCGCTCGAGTAAGTGTGGGTATATCAATC
hrgAinr	<i>hrgA</i>	467-448	CCGGAATTCCTTTGATAAATATGACGGAG
hrgAinf	<i>hrgA</i>	572-590	CCGGAATTCCTTTGATAAATATGACGGAG
catf	<i>cat</i>	-182 to -159	CCGGAATTCGGGTATCGTATGGAGCGGACAACG
catr	<i>cat</i>	674-651	CCGGAATTCGTGCGCCCTTAGTTCTCTAAAGGG
hpyIIIRf	<i>HP0091</i>	414-429	CCGGAATTCGTATAGCAATGCGAGA
hpyIIIRr	<i>HP0091</i>	413-398	CCGGAATTCAGCCCCACTTCTATAC

^a Last letter of primer designation indicates orientation: forward (f) or reverse (r).

^b For *hpyIIIR*, *hpyIIIM*, *HP0090*, and *HP0093*, location refers to the position within the gene in strain 26695 (11), from the first nucleotide of the initiation codon. For *hrgA*, location refers to the position within the gene in strain JP26, from the first nucleotide of the initiation codon.

^c Added restriction sites *underlined*: GCGGCCG (*NorI*), CTCGAG (*XhoI*), GAATTC (*EcoRI*).

Table 3 Characterization of 208 *H. pylori* strains according to status of *hpyIII* locus and *MboI*R susceptibility

Type	<i>MboI</i> phenotype ^a	PCR product amplified			No. of strains
		<i>hpyIIIM</i> ^b	<i>hpyIIIR</i> ^c	<i>hrgA</i> ^d	
Type IR	Resistant	+	+	-	137
Type IS	Sensitive	+	+	-	1
Type IIR	Resistant	+	-	+	60
Type IIS	Sensitive	+	-	+	10

^a According to susceptibility to *MboI* digestion.

^b PCR using primers hpMf and hpMr.

^c PCR using primers hpRf and hpRr.

^d PCR using primers hrgAf and hrgAr.

centrifugation (2000 × g) and resuspended in antibiotic-free RPMI 1640 with 10% FBS to yield a final concentration of 1 × 10⁸ colony-forming units/ml. *H. pylori* were added to AGS cells at a bacteria:cell concentration of 1000:1 for the IL-8 assays or 100:1 for the apoptosis assays. Experiments were performed in antibiotic-free medium containing 10% FBS in T-150 flasks (Corning Costar, Cambridge, MA) or 96-well polypropylene tissue culture plates (Nunc, Roskilde, Denmark). To recapitulate events that occur in native actively replicating gastric mucosa, AGS cells were not serum starved and remained subconfluent during each assay. Levels of IL-8 (expressed as pg/ml) in culture supernatants were assayed in duplicate by specific ELISAs (Research and Development Systems, Minneapolis, MN), according to the manufacturer's instructions.

Assessment of Apoptosis by DNA Fragmentation Assay. DNA fragmentation was quantified using a commercially available ELISA (Boehringer Mannheim Biochemicals, Indianapolis, IN) that detects nucleosomal fragments in cytoplasmic fractions of cells undergoing apoptosis, but not necrosis. For these experiments, 5 × 10³ AGS cells/well were incubated in 96-well plates in duplicate with *H. pylori* (5 × 10⁵ colony-forming units/well) cells or with RPMI 1640–10% FBS alone for 48 h and lysed. Lysates were centrifuged, and supernatants were used for ELISA. Absorbance measured at 405 nm was compared between AGS cells cultured with *H. pylori* or with the negative control.

RESULTS

***MboI* Digestion of *H. pylori* Chromosomal DNA and PCR Analysis of the *hpyIII* R-M Locus.** After a preliminary study involving a few *H. pylori* strains, chromosomal DNA from 208 strains (listed in Table 1) was digested with the restriction enzyme *MboI*. Of the 208 strains, 197 were resistant and 11 (5%) were sensitive. To determine whether the *MboI* digestion susceptibility was attributable to the absence or the genetic variability in the *hpyIII* R-M gene locus (10, 13–15), the presence of *hpyIIIR* and *hpyIIIM* was assessed by PCR, using primers described in Fig. 1. With primers hpMf and hpMr, all 208 strains studied amplified a *hpyIIIM* PCR product of the expected size (550 bp). In contrast, with primers hpRf and hpRr, only 138 strains (66%) yielded a *hpyIIIR* PCR product of the expected size (420 bp). Of the 11 *MboI*-sensitive strains, only 1 strain (88-29) amplified a product with *hpyIIIR*-specific primers. To determine whether the absence of a *hpyIIIR* PCR product was attributable to deletion of the gene or to mutations prohibiting primer annealing, a PCR was performed using primers (locf and locr) that flank the entire *hpyIII* R-M locus (Fig. 1). As expected, strains that previously showed a *hpyIIIR* PCR product now yielded the expected 2.1-kb product (except for strain 99-517, which yielded a product of ~2.0 kb). In contrast, all strains from which *hpyIIIR* had not been amplified now yielded 2.3 kb products (Fig. 1B). Sequence analysis of the 2.3-kb PCR product from a Japanese strain, JP26 (a *MboI*-sensitive strain that failed to amplify a *hpyIIIR* PCR product), revealed that another gene had replaced *hpyIIIR*. We named this gene *hrgA* (AF446009), for *H. pylori* restriction endonuclease-replacing gene A.

Prevalence of *hrgA*. The primers hrgAf and hrgAr, derived from the JP26 *hrgA* sequence, were used to examine the presence of *hrgA*

in all 208 strains included in this study. The results indicated that the presence of *hrgA* and *hpyIIIR* is mutually exclusive in all strains tested (Table 3). Using PCR primer pairs hrgAf and hpMr, hrgAf and locr, and locf and hrgAr (Fig. 1), we confirmed that in all *hrgA*-positive strains, *hrgA* was located upstream of *hpyIIIM*. Strains were classified as type I when they contained *hpyIIIR* and type II when they contained *hrgA*; they were then subclassified based on the *MboI* susceptibility phenotype. Thus, four subtypes can be recognized (Table 3). The prevalences of these types were compared with the strain's geographic origin, *cagA* status, and clinical manifestations. Among 65 isolates from Western countries, *hrgA*⁺ strains were more prevalent (52%) than among 143 Asian isolates (25%; *P* < 0.001; Table 4). Among the Western patients studied, none had gastric cancers, and *hrgA*⁺ strains were more prevalent in *cagA*⁺ backgrounds (26 of 42; 62%) than in *cagA*⁻ backgrounds (9 of 23; 39%; *P* = 0.04). Among the 138 Asian patients studied (all *cagA*⁺), *hrgA*⁺ strains were more prevalent (42%) in gastric cancer patients than in patients without gastric cancer (17%; *P* < 0.001). These results indicate that *hrgA* may be a marker for strains associated with gastric cancer in Asia. There was no significant difference in *hrgA* prevalence in relation to disease outcomes (duodenal ulcer, gastric ulcer, or nonulcer dyspepsia) among nongastric cancer strains from either Asian or Western countries.

Analysis of *hrgA* Sequence. The sequence of *hrgA* was determined and a similarity search for *hrgA*, using BlastP, identified Cj1602, a hypothetical *Campylobacter jejuni* protein, as having highest homology (50% identity; 67% similarity). A weaker similarity was found with the *H. pylori* genes *HP0852* (33% identity; 50% similarity) and its orthologue *Jhp0788* (33% identity; 50% similarity). A ClustalW analysis of the putative gene product showed a conserved region lacking either α-helix or β-sheet characteristics (Fig. 2). This conserved region showed weak homology to regions in hypothetical proteins of *Xylella fastidiosa* and *Pseudomonas aeruginosa* (results not shown). The *hrgA* product is predicted to be globular, not membrane spanning, and without recognizable secretion signals, but no function was apparent from the homology or motif searches.

Role of *hrgA* in Epithelial Cell Stimulation *in Vitro*. Because *hrgA* strains have increased prevalence in isolates from Asian patients with gastric cancer, the direct role of *hrgA* in *H. pylori* virulence was examined. Because gastric mucosal IL-8 levels are significantly correlated with degree of inflammation in gastric tissue (27), we measured the induction of IL-8 release from gastric epithelial cells *in vitro* after coinocubation with selected *H. pylori* strains. After coinocubation of the selected *H. pylori* strains with AGS human gastric epithelial cells, supernatants were assayed for IL-8 release and for apoptosis assessment. We compared *H. pylori* strains from the United States and

Table 4 Relationship between *hpyIIIR* or *hrgA*-containing *H. pylori* strains and clinical outcomes of 202 source patients^a from whom strains were isolated

Locality	Western strains		Asian strains	
	<i>hpyIIIR</i> (n = 31)	<i>hrgA</i> (n = 33)	<i>hpyIIIR</i> (n = 104)	<i>hrgA</i> (n = 34)
Clinical characteristics				
Median age, yr (range)	56 (40–68)	57 (43–67)	58 (42–69)	58 (40–72)
African-American (%)	12	14	0	0
M:F	25:6	24:7	81:23	26:8
Gastric cancer (n = 43)	0	0	25	18
Nongastric cancer (n = 159)	31	33	79	16
Duodenal ulcer (n = 55)	6	9	34	6
Gastric ulcer (n = 42)	5	6	25	6
NUD ^c (n = 62)	20	18	20	4

^a For 6 of the original 208 strains, clinical data were not available.

^b Among Asian strains, *hrgA* frequency in nongastric cancer cases (16 of 95; 17%) is significantly lower (*P* < 0.001) than in gastric cancer cases (18 of 43; 42%).

^c NUD, nonulcer dyspepsia.

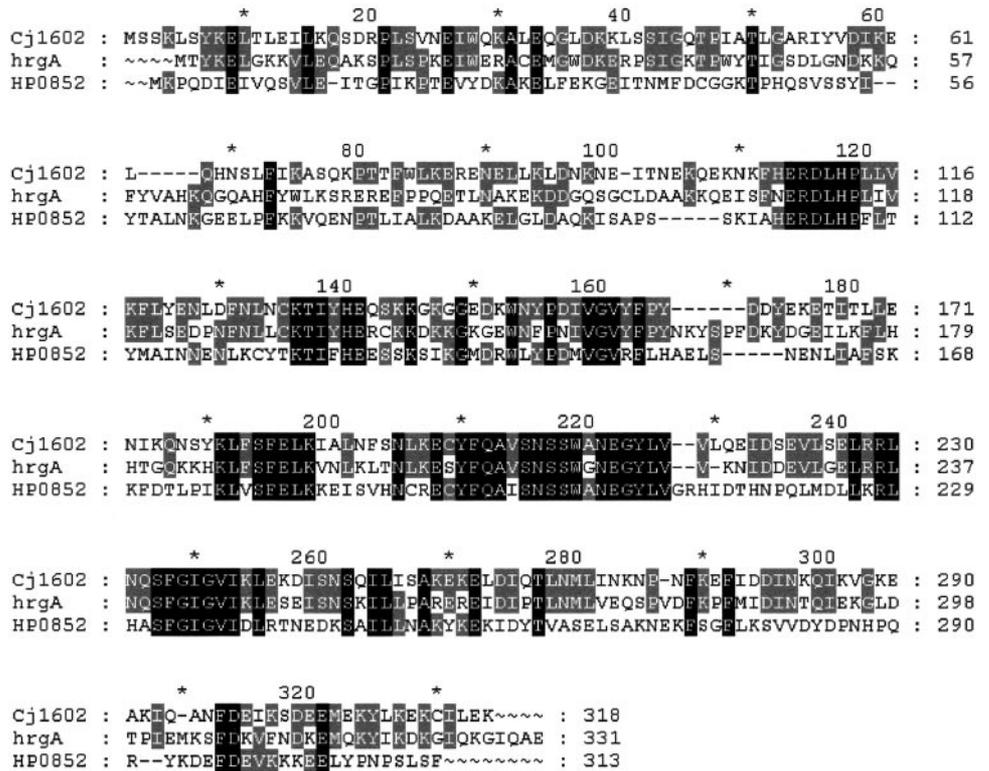


Fig. 2. ClustalW alignment of translated sequence of putative products of *Cj1602* (from *C. jejuni* strain NCTC11168), *hrgA* (from strain JP26), and *HP0852* (from strain 26695). Black background indicates conserved amino acid in all three strains; gray indicates conserved amino acid in two of the three strains.

Japan, including both *hpy*IIIR (United States, *n* = 9; Japan, *n* = 33) and *hrgA* (United States, *n* = 14; Japan, *n* = 6) genotypes. An isogenic mutant of JP26 in which *hrgA* was insertionally inactivated (JP26-*hrgA::cat*) was assessed in parallel. There was no significant difference in either induction of IL-8 or apoptosis in AGS cells when we compared the *hpy*IIIR and *hrgA* strains (Table 5), or between the strains from the United States and Japan (data not shown). The *hrgA*⁻ mutant (JP26-*hrgA::cat*) and wild-type JP26 cells also showed essentially identical behavior in these *in vitro* models (data not shown). Thus, *hrgA* does not encode a factor responsible for the properties associated with *H. pylori* virulence that are measured in these models.

DISCUSSION

This study reports that of 208 *H. pylori* strains examined, originating from different continents, all possess *hpy*IIIM, preceded by either *hpy*IIIR or *hrgA*. No strain contains or lacks both. The organization of the *hpy*III locus parallels the *hpy*I locus, which consists of *hpy*IM and either *iceA1* (which encodes the *Hpy*IR protein) or *iceA2*, an unrelated hypothetical protein (28, 29). Activity of *Hpy*IM (CATG-specific adenine methylation) is present in 100% of the strains studied (10, 30), and as shown in this study, *Hpy*IIIM activity (GATC-specific

adenine methylation) is found in 95% of *H. pylori* strains as determined by susceptibility to *Mbo*I. This frequency of methylation is substantially greater than that of other methylases among the *H. pylori* strains studied (10, 20). Of the 11 *Mbo*I-sensitive strains, only 1 strain (88-29) possessed *hpy*IIIR; additional studies on this strain, including experimental rodent infections, have been initiated. The parallels between *hpy*III and *iceA* suggest that replacement of a restriction endonuclease gene by a nonrelated gene may be common in *H. pylori*. In that sense, *iceA2* may better be renamed as *hrgB*, because it is another example of a *H. pylori* restriction endonuclease-replacing gene. The name *iceA2* is not appropriate because the gene bears no structural or functional relationship to *iceA1*, which encodes a CATG-recognizing type II restriction enzyme homologous to *Nla*III (21, 28).

Our findings suggest that *hrgA*, a strain-specific gene, is associated with gastric cancer among *H. pylori* isolates from Asian patients. Differing recovery rates of *hrgA*⁺ versus *hrgA*⁻ strains attributable to differential growth may introduce bias, but because we have not observed differences in growth rates between *hrgA*⁺ and *hrgA*⁻ strains *in vitro* (data not shown), this seems less likely. In previous reports, the *vacA* s1 genotype and *cagA* or *iceA1* positivity have been identified as markers of strains associated with ulcer disease or gastric cancer among Western populations (21–23, 31). Such a pattern is not immediately evident in East Asia, where regardless of the clinical status of the patient, nearly all isolates are *vacA* s1 and *cagA* positive (9, 32) and *iceA1* status does not have predictive value (9). We could not determine the correlation between *hrgA* and gastric cancer among Western strains because, at present, our strain collection does not contain a sufficient number of cancer strains from Western countries for adequate comparisons to be made. However, we have initiated collaborations to obtain such strains to address this question in future studies. The lack of differential induction of IL-8 release or apoptosis in gastric epithelial cells by *hrgA*⁺ strains compared with *hpy*IIIR strains does not support a direct role in virulence. It cannot be excluded that acquisition of *hrgA* is selected by gastric cancer devel-

Table 5 Effect of *H. pylori* strains on AGS cells, according to *hrgA* or *hpy*IIIR genotype^a

Criterion	Mean ± SD		<i>P</i> ^b
	<i>hpy</i> IIIR (<i>n</i> = 42)	<i>hrgA</i> (<i>n</i> = 20)	
IL-8 induction (pg/ml)	1255 ± 696	1291 ± 595	0.83
Fold increase in DNA fragmentation ^c	1.8 ± 1.4	1.5 ± 1.1	0.34

^a *H. pylori* cells were cocultured with AGS cells at a ratio of 1000:1 and incubated for 24 h for the IL-8 induction assay, and at a ratio of 100:1 for 48 h of incubation in the DNA fragmentation assay.

^b Based on paired *t* test.

^c Relative to controls.

opment, rather than being a causative factor. Whatever the case, the important clinical point is that *hrmA* may represent a novel marker for individuals with gastric cancer in Asia, where no such discriminatory *H. pylori* markers exist at present. The mere presence of *hrmA* may not be the only relevant factor for gastric cancer. Disease risk also could depend on transcription and/or translation of the *hrmA* gene product or on indirect effects thereof on expression of other genes. However, these findings provide a framework for future studies that can more mechanistically delineate the role of this locus in gastric carcinogenesis. Further studies are necessary to examine the function of *hrmA* and to ascertain its correlation with clinical outcome. If this observation is confirmed, *hrmA* may be used in the future to identify individuals of higher gastric cancer risk.

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