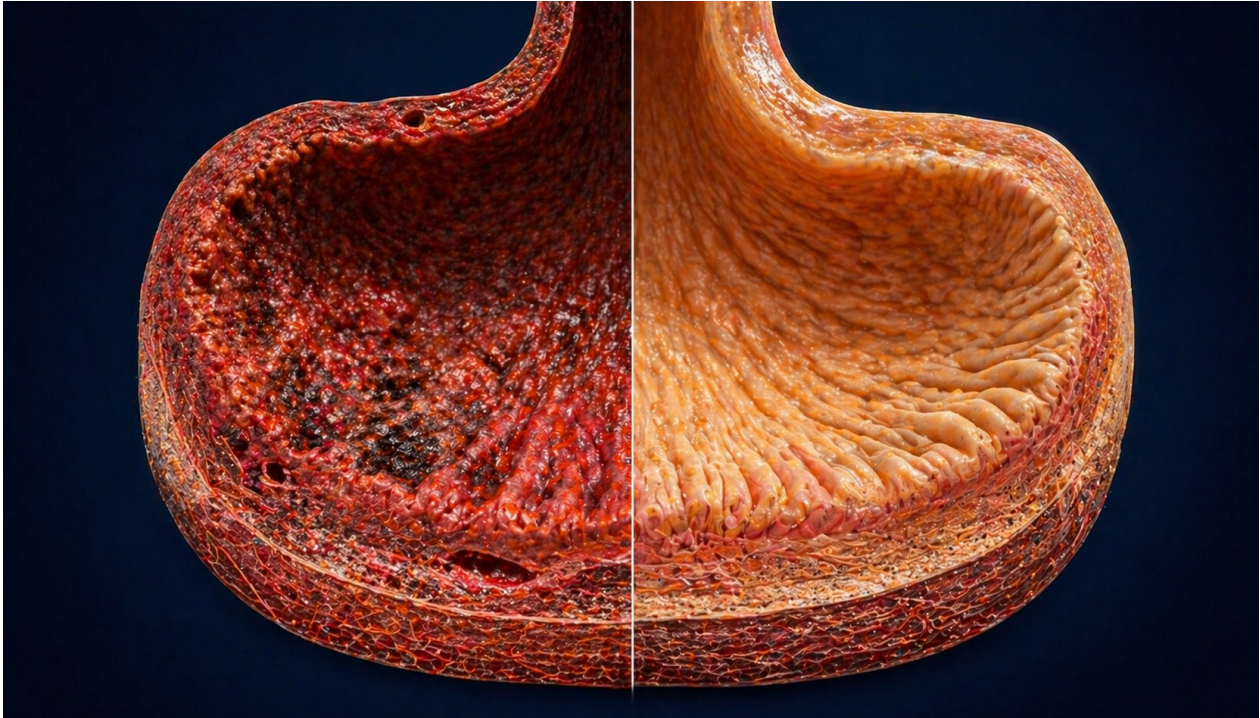


# THE H. PYLORI TRUTH REPORT

*What Your Doctor Never Had Time to Explain*

Bonus 1 -- The Ancestral Stomach Seal | By Biodun Adeyemi

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BONUS 1

# The H. Pylori Truth Report

## What Your Doctor Never Had Time to Explain

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This is the plain-language explanation of what H. pylori actually does inside your stomach -- the mechanism that no doctor had twenty minutes to walk you through, and that no article explained without drowning you in terminology.

Read this before the protocol if you want to understand the full picture from the beginning. Read it after if you want to understand what the 21 days was actually doing.

## What H. Pylori Is and Where It Came From

Helicobacter pylori is a spiral-shaped, gram-negative bacterium. Its full name describes two things: its shape (helical) and the part of the stomach it colonises (the pylorus and gastric antrum -- the lower portion where the stomach connects to the small intestine).

It is one of the most successful human pathogens in existence. More than half the world's population carries it. In Nigeria, the figure is 87.7% -- the highest national prevalence estimate anywhere on earth. In practical terms: out of every ten Nigerians you know, statistically eight or nine of them carry this bacteria. Most have no idea.

H. pylori is almost always acquired in childhood. By the time a Nigerian adult is managing recurring ulcer symptoms in their thirties or forties, the bacteria has typically been present since childhood. It was already there before the first blister pack. Before the first omeprazole prescription.

## How H. Pylori Survives in Your Stomach -- The Urease Mechanism

The stomach has a pH of approximately 1.5 to 3.5 -- highly acidic, designed to kill most microorganisms that enter it. H. pylori should not be able to survive there. The reason it does involves one of the more elegant survival mechanisms in microbiology.

H. pylori produces an enzyme called urease in large quantities. Urease converts urea -- present naturally in the stomach's secretions -- into ammonia and carbon dioxide. Ammonia is alkaline. It neutralises the acid in the immediate vicinity of the bacteria, creating a microscopic pH-neutral zone around each H. pylori cell. Inside that zone, the bacteria is comfortable. The rest of the stomach remains acidic. The bacteria has, in effect, built itself a protective microenvironment inside an environment that should kill it.

### Research note

*H. pylori urease enzyme: converts urea to ammonia and CO<sub>2</sub>, neutralising local acid environment -- the defining mechanism of H. pylori pathogenicity.*

*Nigeria H. pylori prevalence: 87.7% -- highest estimated national prevalence globally (Gastroenterology, systematic review and meta-analysis, Hooi et al., 2017).*

*H. pylori is classified as a Group 1 carcinogen by the World Health Organisation -- a causative agent for gastric cancer in a minority of long-term carriers.*

## How H. Pylori Damages the Stomach Lining

Having established its foothold, H. pylori burrows toward the gastric epithelial cells and attaches to them. The body's immune system sends white blood cells to the site, producing a sustained inflammatory response -- chronic active gastritis. That sustained inflammation does progressive damage:

- It damages the mucus-producing cells, thinning the protective mucosal layer.
- It creates areas of exposed gastric epithelium -- tissue directly exposed to stomach acid.
- It disrupts normal acid regulatory mechanisms, often increasing acid output.
- It generates oxidative stress -- a secondary damage mechanism that accelerates mucosal erosion independently of the acid.

*"H. pylori is the cause. The compromised lining is the consequence. The acid damage is the symptom. Omeprazole addresses the symptom. This protocol addresses the cause and the consequence simultaneously."*

## Why Omeprazole Cannot End the Cycle

Omeprazole was designed to block acid production -- and it does this effectively. Research published in Gastroenterology confirms that proton pump inhibitor therapy -- even when continued for years -- does not eradicate *H. pylori*. The bacteria remains in the stomach lining, continuing to trigger inflammation and compromise the mucosal layer. When the omeprazole is stopped, symptoms return. This cycle was predicted by the pharmacology the day the first prescription was written.

## What the Research Says About Plant Compounds

**Garlic (allicin):** A meta-analysis of eight randomised controlled trials found allicin as an add-on treatment produced *H. pylori* eradication rates of approximately 93.81%, with significantly higher ulcer healing and remission rates compared to standard therapy alone.

**Ginger:** A clinical trial found 3g daily of ginger powder for four weeks produced a 53.3% *H. pylori* eradication rate in positive patients. A separate RCT confirmed ginger alongside standard PUD treatment significantly increased treatment efficacy.

**Turmeric (curcumin):** Curcumin demonstrated inhibitory activity against 65 clinical isolates of *H. pylori*, with MIC between 5 and 50 micrograms per millilitre, irrespective of strain genetic makeup.

**Papaya leaf:** A Nigerian study from the Federal University of Technology, Akure, found ethanolic extract of papaya leaf demonstrated potent growth-inhibitory effects against *H. pylori* isolated directly from ulcer patients in Ondo State, Nigeria.

**Unripe plantain:** Leucocyanidin, isolated by chromatography and HPLC, demonstrated significant protective effects against gastric erosions and works by stimulating growth of the gastric mucosa.

## Why You Were Never Tested for It

*H. pylori* testing is not standard practice in most Nigerian clinical consultations for dyspepsia or ulcer symptoms. The most accessible non-invasive tests -- the urea breath test and the stool antigen test -- require laboratory infrastructure not consistently available across all clinical settings. The result: most patients are managed empirically -- prescribed an acid suppressant and monitored for symptom response without a bacterial diagnosis.

If you want to confirm *H. pylori* status: the stool antigen test is the most accessible non-invasive option, available at most medical diagnostic laboratories in Lagos, Abuja, Port Harcourt, and Ibadan. Testing is ideal but not required to begin this protocol.

## Stop Blaming Yourself

Your ulcer keeps returning because a bacteria that arrived in your stomach when you were a child has never been adequately addressed. Not because of what you ate. Not because of how you handled difficult periods. The bacterial environment has remained in place, and the acid suppressants that were prescribed -- however faithfully taken -- were not designed to change that environment.

You now know what was actually happening. The self-blame -- the sense that this persistent, recurring condition is a personal failure -- was never accurate. It can be set down.

*Note: This report is for educational purposes only. It is not intended to diagnose, treat, cure, or prevent any disease. Consult a qualified healthcare provider before making changes to any medication or treatment plan.*

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*-- End of The H. Pylori Truth Report --*

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# Thank You

*For wanting to understand what you were actually dealing with.*

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Most people manage this condition for years without ever knowing what it actually is. They take the capsule in the morning, adjust what they eat, make excuses at tables -- and never stop to ask the question this report was built to answer: what is *H. pylori*, how did it get there, and why has the standard treatment not been enough?

You asked that question. That alone puts you in a different position from most people who share your diagnosis. Knowledge is the part of this that does not expire -- even after the protocol is done, even after the symptoms are gone, you will know what happened and why it is not coming back.

## ■ Questions or Feedback

If anything in this report raised a question the main guide did not answer, or if there is a claim you want to verify or challenge, write directly to Biodun. The research behind this report is real and traceable -- and every question is welcome.

[therootsandremedies@gmail.com](mailto:therootsandremedies@gmail.com)

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## The Next Step After the Protocol

This report explained what *H. pylori* is and how it damages the gastric environment. The 21-day Stomach Seal protocol addresses that damage directly. But there is a third stage -- the one that determines whether the recovery holds long term. The gut microbiome depleted by the infection. The liver taxed by years of acid suppressants. The stress-cortisol loop that keeps triggering symptoms even after the bacteria is gone. The Ancestral Body Reset is built for exactly that stage.

## ■ The Ancestral Body Reset

*What to Do After the Ulcer Is Gone*

Gut microbiome rebuild with Nigerian fermented foods. 14-day West African liver support protocol. The 90-day Ancestral Body Maintenance Plan. Simple, sustainable, built around real Nigerian life.

**Write to [therootsandremedies@gmail.com](mailto:therootsandremedies@gmail.com) to access this guide.**

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*Follow the protocol. Trust the sequence.*

*-- Biodun Adeyemi*

*Lagos / Ibadan*

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