The recent publication of _H. pylori_ infection and serum ferritin is very interesting (1). Zamani _et al._ proposed that “We did not find a significant relationship between _H. pylori_ infection and low serum ferritin levels or iron deficiency anemia (1).” The main problem on this work might be the control of confounding factors. At least, _H. pylori_ infection does not mean anemia. Having _H. pylori_ infection can be problematic and leads to gastritis. However, the anemia can be results in cases with chronic gastritis which chronic blood loss to gastrointestinal tract can be expected. Hence, it might not be a good hypothesis to make a correlation between _H. pylori_ infection and anemia. In a recent publication by Sato and Ozawa, the actual molecular mechanism that might link the relationship between _H. pylori_ infection and anemia could not be concluded (2). In this work, Zamani _et al._ tried to assess the relationship between _H. pylori_ infection and a specific kind of anemia, iron deficiency anemia. The ferritin level is also assessed. The main problem is that there is no quality control of the ferritin level determination. In addition, several conditions such as underlying anemic disorders that can alter the determined serum ferreting level (such as thalassemia and hemoglobinopathy) are not excluded in this work. Nevertheless, a common infection that can be seen in the children around the world, hookworm infestation, which can be the important cause of iron deficiency anemia, is not well excluded. To answer whether there is an exact relationship between _H. pylori_ infection and serum ferritin or not, needs further good designed study. Indeed, the good study design to reply this query is already mentioned in a recent publication by Chaabane _et al._ as “prospective randomized studies comparing the effects of iron administration with or without _H. pylori_ eradication” (3).

**References**