



Crispian Scully

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Aspects of Human Disease

This series outlines, briefly, the clinical presentation, diagnosis and management of the 31 chronic medical problems which are most common and important in the developed countries, but space also precludes coverage of acute infections and most malignant disease.

13. Coeliac disease (gluten-sensitive enteropathy)

Coeliac disease is a genetic hypersensitivity or toxic reaction of the small intestine mucosa to the gliadin component of gluten, a group of proteins found in all forms of wheat, related grains (rye and barley) and possibly oats. Ingestion of gluten causes destruction of jejunal villi (villous atrophy) and inflammation, leading to malabsorption. Coeliac disease is the most common genetic disease in Europe and may be associated with other autoimmune disorders.

Clinical features

Coeliac disease may present at any age and mimic a variety of medical conditions. Many affected individuals are asymptomatic but coeliac disease can result in malabsorption leading to growth retardation, abdominal pain, steatorrhoea and behavioural changes. Vitamin and mineral deficiencies may result in anaemia, osteomalacia, bleeding

tendencies and neurological disorders. Intestinal lymphomas arise in about 6% of individuals.

Diagnosis

The clinical features of coeliac disease are usually non-specific and therefore investigations are needed to establish the diagnosis.

- Full blood count. Anaemia is present in 50% of patients.
- Haematinics. Ferritin, vitamin B₁₂ and folate levels may be low – secondary to malabsorption.
- Serum antibody screening. Assays for serum antibodies to endomysium (the connective tissue stroma covering individual muscle fibres), tissue transglutaminase and gliadin.
- Endoscopic biopsy of jejunal mucosa. Coeliac disease leads to villous atrophy. The biopsy, if positive, is repeated after a gluten-free diet has been maintained for 3 months.

Management

It is important to diagnose coeliac disease and to institute a gluten-free diet, even in those with minimal symptoms, as early as possible in order to prevent long-term complications (eg intestinal lymphoma).

Treatment of coeliac disease includes correction of nutritional deficiencies, and a gluten-free diet for life. Instead of wheat flour, patients can

use potato, rice, soy, or bean flour and can buy gluten-free bread, pasta, and other products. Plain meat, fish, fruits, and vegetables do not contain gluten. Patients require continued supervision, as it is often difficult to comply with such a diet, especially if eating away from home.

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CPD ANSWERS

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| 1. C | 6. B, D |
| 2. C, D | 7. B, D |
| 3. B, C | 8. A, B, C, D |
| 4. A, B, D | 9. A, D |
| 5. A, C | 10. A, B |

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