

What is it?

Auto-immune

T-Cell mediated enteropathy of S.I. CD lasts a lifetime. Consumption of gluten flattens the villi (finger-like projections where a lot of nutrient absorption happens) & inflammation = nutrient malabsorption

Reduces production of enzymes - lactase, sucrase, maltase

S/S

persistent unexplained gastrointestinal symptoms (N/V/D/bl-oating)	Easy bruising
mouth ulcers	abdominal pain
steatorrhea (fatty stools)	Delayed growth or weight loss
iron, vitamin B12 or folate deficiency	Dermatitis herpetiform (skin rash)
Prolonged fatigue	Growth failure
Infertility	Anxiety, poor memory, headache, depressed mood

Comorbidities

T1DM	autoimmune thyroid disease
IBS	autoimmune liver disease

Sjogren disease (autoimmune condition affecting moisture-producing glands)

Screening

Blood Test

Immediate relatives of someone with CD have a 1 in 10 risk

Diagnosis

Diagnosis made only by a gastroenterologist

1. Keep eating gluten (other test results may not be accurate - min of 6 weeks)

Diagnosis (cont)

2. Blood screening. tTG-IgA and DGP-IgG antibodies OR tTG-IgA and total IgA level
3. S.I biopsy - gastroscopy/endoscopy

Intervention

Ensure official diagnosis prior to intervention

Only treatment is **long-term GF diet**

Strategies

Edu:	Label reading. Wheat vs gluten. Cross-contamination, GF certification, "may contain"
At home	labelled GF container, separate spreads/colanders/toasters, prepare gluten free meals first
Eating out	Tell staff. avoid foods fried in the same oils, ask them to prepare on a separate board/clean utensils. Take prepared foods with you
Apps	Celiac Australia, Find me gluten free
Support	Join Facebook groups – recipes and support

Gluten

wheat	barley
rye	oats
semolina	malt barley
spelt	couscous
durum	Thickeners 1400-1450
Wheat maltodextrin (thickener)	

GF Grains

almond meal	quinoa
rice	rice noodles
rice porridge	rice crackers

Monitoring

At risk nuts: iron, calcium, folate and Vit D
Review appointment. Every 3-6 months until well. Symptom free = every 1-2 years

Bloods: tTG, DGP, total IgA, Thyroid Function tests; liver enzymes

2 years after diagnosis - Duodenal biopsy
Every 5 years - Bone density scan - risk of osteopaenia/osteoporosis

Oats

Have a similar protein to gluten called **avenin**. Can trigger the same immune response in *some* (5-10%) pts w/ CD

Australia & NZ: Oats can not be labelled GF - can still use *wheat free uncontaminated, pure*

Coeliac Australia: "*pure oats are safe and well tolerated by the vast majority of people with CD*"

"pure oats" = free of wheat, rye and barley contamination

Lactose intolerance

Common in untreated CD - a brush boarder enzyme

GF diet allows lactase production to return to normal and the lactose intolerance to resolve

Guidelines & References

Montoro-Huguet et al. Iron deficiency in Celiac disease: prevalence, health impact and clinical management. NutrientsLinks to an external site., 2021

Ludvigsson et al. Diagnosis and management of adult coeliac disease: guidelines from the British Soc of Gastroenterology

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