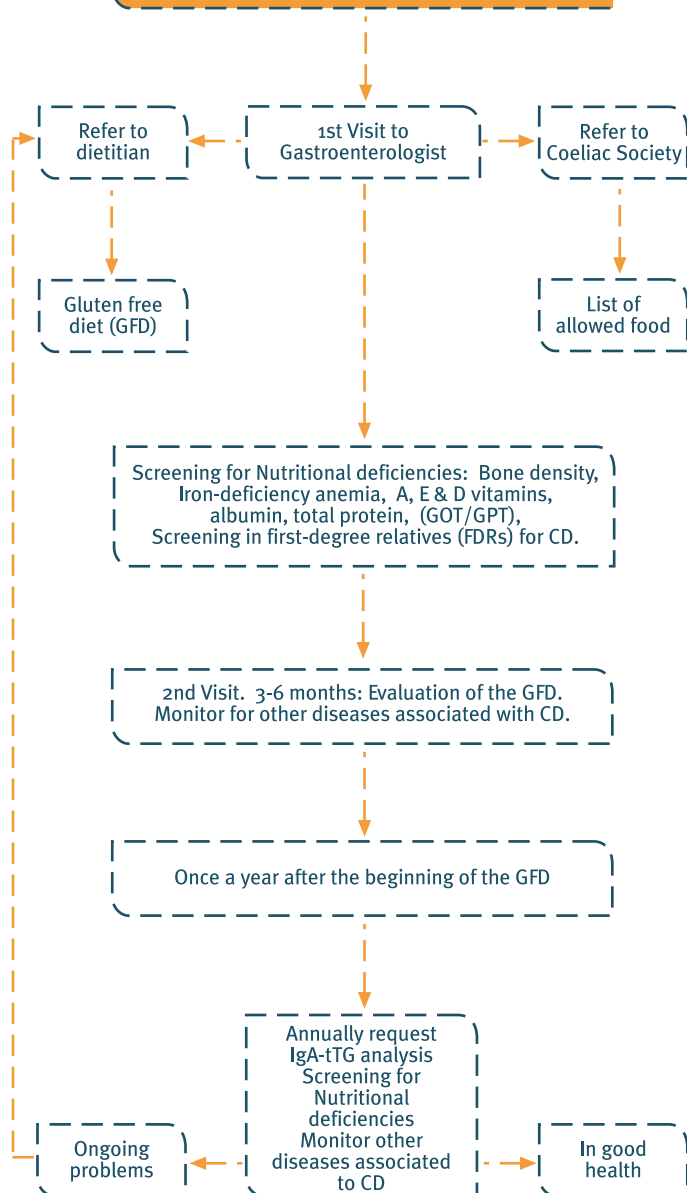


Follow Up

Recently Diagnosed Patients



- It is estimated that 1% of the European population may have coeliac disease. For each diagnosed case of the condition there are 7 undiagnosed cases. The disease is underdiagnosed due to the lack of awareness among healthcare professionals and the public – even though sensitive and specific diagnostic tests are available.

- The classic manifestation of the disease with diarrhoea and malabsorption of nutrients is not very common any more, atypical and silent symptoms are much more frequent.

- It is thus critical, to increase the knowledge of the disease via the training of doctors, dieticians and other healthcare professionals.

- Gluten must not be removed from the diet before diagnostic tests are undertaken – without gluten in the diet it will be impossible to test for the disease.

- Withdrawal of gluten from the diet is the only treatment of the disease, and leads to an improvement of health, a decrease in the levels of the autoantibodies associated with the disease, and the repair of the intestinal mucosa. Withdrawal of gluten from the diet also prevents the development of associated illnesses and complications.

- Although the gluten-free diet is in principle easy to follow, there are a number of factors that complicate correct adherence, such as poor labelling of gluten-free products and the lack of an adequate analytical methods for the detection of gluten.

- However, a healthy balanced diet can be eaten by eating naturally gluten-free foods such as vegetables, fish, eggs and pulses and specialist gluten-free products. Coeliac societies throughout Europe provide practical help to people with the disease and the families and friends with information on gluten-free foods and advice about keeping healthy.

Failure to keep to a strict gluten-free diet (GFD) is the main reason for symptoms associated with the condition continuing.

cdmedics-info@urv.cat
www.cdmedics.eu



**Coeliac Disease
Management and
Monitoring**



Coeliac Disease (CD)

Guidelines for the Diagnosis of the Disease

Children

Diarrhoea
Vomiting
Abdominal pain
Apathy
Headache
Pain in the joints
Delayed menarche
Constipation

Adults

Dispepsia
Soft stools
Abdominal pain
Tiredness
Irritable colon
Bone pain
Sterility, miscarriage
Paresthesia, lockjaw
Anxiety, depression
Ataxia
Constipation
Premature menopause
Hair loss
Mouth ulcers

Malnutrition
Abdominal distension
Stunted growth
Anaemia
Oedema
Hyperactivity
Rickets
Mouth ulcers
Enamel hypoplasia
Arthritis

Malnutrition
Oedema
Short stature
Peripheral neuropathy
Myopathy
Sideropenic anaemia
Hepatomegaly
Hypertransaminasaemia
Osteopenia
Osteoporosis
Fractures

Risk groups

First-degree relatives
Auto-immune diseases
Diabetes Mellitus, Type 1
Autoimmune thyroiditis
IgA deficiency
Down syndrome

Associated diseases

Dermatitis herpetiformis
Primary biliary cirrhosis
IgA Nephropathy
Inflammatory bowel disease
Sjogren's syndrome
Systemic lupus erytematosus
Addison's disease
Cystic Fibrosis
Rheumatoid arthritis
Psoriasis
Alopecia
Vitiligo
Turner's syndrome
Williams' syndrome

Complications

Coeliac crisis
Intestinal lymphoma
Osteoporosis
Digestive carcinoma
Bacteria overgrowth
Refractory Sprue

Diagnostic Algorithm for Serological Testing in Coeliac Disease

