

STEP 2

Diagnostic Guidelines

Serologic Tests

Screening in patients with celiac disease should consist of:

- 1 IgA endomysial antibodies (EMA)
- 2 IgA tissue transglutaminase antibodies (TTG)
- 3 Total IgA level (If 1 and 2 are negative but IgA level is low, then celiac disease is strongly suspected)

For an individual with suggestive symptoms, four scenarios are possible. First, the individual might have selective IgA deficiency. Second, the other serological test could be conducted and/or a small bowel biopsy could be performed. Third, the patient may not have celiac disease. Fourth, the patient may be on a self-imposed gluten-free diet which can result in false negative tests.

Biopsy

Diagnosis of celiac disease can only be confirmed with a small bowel biopsy:

- 1 Patient should be referred to a gastroenterologist for this procedure.
- 2 Patients should have 4-6 samples taken from the small bowel during the biopsy in order to confirm the presence or absence of celiac disease.
- 3 Patients should **NOT** start a gluten-free diet until after they have been biopsied. Commencement of a gluten-free diet prior to biopsy could rejuvenate the small bowel villi and result in a false negative diagnosis.

STEP 3

Treatment Guidelines

The only treatment for celiac disease is a gluten-free diet for life.

Following a diagnosis of celiac disease, patients should be referred to a dietitian for more information and guidance on following a gluten-free diet.

The gluten-free diet can be complicated. Obvious sources of gluten include wheat, rye, triticale, barley and oats; however, persons with celiac disease must be alert to hidden sources of gluten. Such hidden sources include HVP/HPP (hydrolyzed vegetable/plant protein); malt; spelt; kamut; and certain drug products.

The diet should never be started before a small intestinal biopsy is positive for celiac disease.

Today's processed and packaged foods have many hidden sources of gluten which can be unintentionally ingested. Particular care should be taken in the selection of soups, luncheon meats and sausages.

The person with celiac disease **must read the list of ingredients on all labels, every time.**

There is a great variation in sensitivity to gluten among those with celiac disease, and although one may have no obvious symptoms, damage to the intestinal lining may still occur.



For more information on the gluten-free diet, please visit www.celiac.ca and access the nutrition section. (December 2005 - CCA Celiac Resource kit for Health Professionals will be available on-line)

