

SW Thames Regional coeliac disease referral pathway for CYP with type 1 diabetes



SW Thames Regional coeliac disease referral pathway for CYP with type 1 diabetes

Background

Children and adolescents with type 1 diabetes mellitus undergo screening for coeliac disease at diagnosis. The frequency of on-going screening is debatable, but most paediatric diabetes units in the South West Thames region perform this annually. Different hospitals use different antibodies for screening such as tissue transglutaminase (tTG) antibodies or Endomysial antibodies.

The common screening tests used in most centres are:

- Endomysial antibodies which are reported as weakly, positive, or strongly positive or
- tTG antibodies which are reported as a titre (in numerical values with reference range), but still divided into weakly positive or positive

How to interpret the results and what to do next ?

- **Centres that use tTG antibodies as first line screening**

If tTG antibodies are weakly positive, request endomysial antibodies. If the endomysial antibodies come back as weakly positive, repeat both 6 months later. If the endomysial antibodies are positive or strongly positive, refer to gastroenterology at St George's Hospital.

Recent ESPGHAN coeliac committee have recommended that if tTG titre is higher than ten times the upper limit of the laboratory titre, the patient may avoid duodenal biopsy and be started on gluten free diet (GFD). However, if this pathway is taken, all symptoms must be shown to have gone AND any coeliac antibodies that was positive in an individual patient should be shown to have reverted to negative.

- **Centres that use endomysial antibodies for routine screening:**

If endomysial antibodies are weakly positive, repeat in 6 months. If positive or strongly positive refer to gastroenterologist.

Common pitfalls:

- Forgetting to consider alternative diagnosis. Both tTG and endomyseal antibodies can be weakly positive in other conditions e.g. gastroenteritis, and results should have reverted to negative when repeated 6 months later.
- Repeating antibodies too soon after a weakly positive antibody test at screening
- Repeating antibodies too soon after starting gluten free diet after endoscopy in a patient with confirmed coeliac disease
- Inappropriate advice on starting gluten free diet before endoscopy. This can result in false negative results and subject the patient to an unnecessary repeat endoscopy at a later date. It must be emphasized to patients and carers that patients pending endoscopy must remain on a normal gluten containing diet for results to be reliable.

Updated: Nov 2017