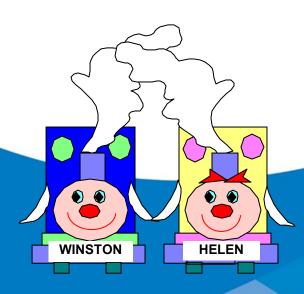


Coeliac Disease

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The nature of the condition:

Around one in 100 people in the UK has coeliac disease. This means they are sensitive to the protein gluten which is found in wheat, rye, and barley. Some are also sensitive to oats.

The condition is not the same as food allergy or intolerance. It is an auto-immune response, which means that a child's own immune system begins to attack their body's tissues when gluten is detected. The result can be uncomfortable symptoms that can make life tough for a child.

There is not any cure – once diagnosed, coeliac disease is a life-long condition that a person does not grow out of. With the right help and support, families can make changes to a child's diet to minimise the risk of symptoms and prevent complications.

When a child eats food containing gluten, the body reacts as though it is harmful and antibodies are produced. This reaction causes damage to the lining of the small intestine (gut) and can also affect other parts of the body. In turn, the damage prevents the body from absorbing essential nutrients from carbohydrates, fat, protein, vitamins and minerals. This can lead to a number of symptoms including:

Diarrhoea, constipation, abdominal pain, weight loss and malnutrition.

Who is most likely to get it?

Coeliac disease does run in families. Research shows that a child has a one in 10 chance of developing coeliac disease if a close family member has it. It can develop at any age. Sometimes, an infant may show signs of coeliac disease after weaning but it can develop in later childhood and adulthood.

What are the signs and symptoms?

These vary – some children are mildly affected, while others experience more severe symptoms that can make life more difficult. Signs and symptoms can include: diarrhoea or constipation, nausea, bloating and excessive wind, Itchy rash, tiredness and headaches, weight loss (not always) and abdominal pain.

As a result of food being poorly absorbed, a child's growth and weight can be affected. Anaemia can also be a problem because a child is not able to absorb enough dietary iron from their food. Lack of calcium can also be a problem as not enough will be absorbed from an early age.

Other symptoms in young children include irritability and muscle wasting in the arms and legs.

Symptoms vary in older children, but can include poor growth and frequent mouth ulcers.

How is it diagnosed?

Your doctor will look at your child's symptoms and take a blood test. This blood test checks for a specific type of antibody made by the body in response to eating gluten. It is important not to omit gluten from your child's diet before the test otherwise these antibodies will be difficult to detect. Stay on a normal gluten containing diet before all investigations are carried out.

The GP may then refer your child to a paediatric gastroenterologist (doctor specialising in children's gut problems). To confirm the diagnosis, a child will need a gut biopsy. This involves passing an endoscope (a thin flexible tube with a light at the end) through the mouth, into the stomach, then into the small intestine. The doctor can look down the tube, see the gut lining clearly and collect small samples of gut lining (biopsies). These samples are examined in the laboratory to check for abnormalities consistent with coeliac disease. In young children, this test is usually carried out under a general anaesthetic.

Our usual form of treatment

Unfortunately there in no treatment other than avoiding gluten.

Gluten is in lots of different foods including: Bread, Cakes, pasta, breakfast cereals, pastries, and pizza bases, other foods containing wheat, rye and barley. Some children need to cut oats out of their diet too.

Gluten-free foods

Your child will be referred to a specialist dietician who can discuss the gluten-free diet with you in detail, and help you plan healthy meals that are suitable. Lots of foods are naturally gluten free and your child will able to eat these freely. These include: rice, potatoes, corn (maize), meat, eggs, fish, cheese, milk, most yoghurts, fruits, vegetables, pulses (peas, beans and lentils. Supermarkets now offer 'free-from' ranges of foods, most of which will be gluten free. The dietician will be able to advise you on these products and how to get hold of them. Once your child has been gluten-free for a while, their body will begin absorbing the nutrients that they need from their diet again. It can take the small intestine around three to six months to recover fully. Your child should start feeling better within a few weeks but this can vary. Your child will need to follow a gluten-free diet for life.

Complications and discomforts of treatment

There is no cure for coeliac disease and it is not a condition that a child grows out of.

Your child will need regular check-ups with a dietician, paediatrician or GP to make sure they are growing well, and to make sure your child is not developing other conditions that can be associated with coeliac disease, such as osteoporosis. You will need to see a dietician regularly too to review your child's diet, make sure it is still gluten-free, check your child is not avoiding foods they do not need to and ensure they are growing adequately.

If you have any further questions, please contact your child's consultant via their secretary via the hospital switchboard. The secretaries are available Monday to Friday, 9.00 am to 5.00 pm.

If you need to contact the department outside of these hours, please phone either:

Ward 3F 0151 430 1616 Ward 4F 0151 430 1791

Whiston Hospital Warrington Road, Prescot, Merseyside, L35 5DR Telephone: 0151 426 1600

