WHAT'S THE TREATMENT?

Here is the good news. Coeliac disease can be treated without medication. Currently, the only treatment for coeliac disease is a gluten-free diet. And while gluten is contained in a lot of everyday food, there is a growing market of specially made gluten-free products, and of course there are lots of foods that are naturally gluten-free.

Once gluten has been removed from your diet, you will begin to heal and symptoms will usually improve in a few weeks. It can take between two and five years for the gut to fully heal.

Once you have a diagnosis, you will be referred to a dietitian for advice on taking gluten out of your diet. Your GP or dietitian will also be able to advise you about getting gluten-free food on prescription, which will be particularly helpful to those on low incomes.

Please remember that you must not remove gluten from your diet until you have been properly assessed for coeliac disease by a blood test and a biopsy. Removing gluten from your diet before this process has been completed could mean inaccurate results and the diagnosis may be missed.

Being correctly diagnosed with coeliac disease means getting the right care and support from the NHS. This will include being monitored for conditions that you might have developed before diagnosis or if you are not getting the gluten-free diet right, such as osteoporosis and in very rare cases, small bowel cancer.

WHAT NEXT?

If you think you may have coeliac disease, you should book an appointment with your GP to discuss your concerns and get a blood test.

If you're still a little unsure, you might find it useful to take the Coeliac UK online assessment for coeliac disease. This short questionnaire will take you through the symptoms of coeliac disease and other risk factors. To take the online assessment and find out more about coeliac disease, visit:

ISITCOELIACDISEASE.ORG.UK

0333 332 2033

Coeliac UK is the national charity for people with coeliac disease and dermatitis herpetiformis. We work to make a difference to the lives of our Members through health advice and support, campaigning for change and supporting research.

A Registered Charity and Company Limited by Guarantee and Registered in England.

Registered Number 3068044. Registered Charity Number in England and Wales 1048167.

Registered Charity Number in Scotland SC039804.

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WHAT IS COELIAC DISEASE?

Coeliac disease (pronounced see-liac) is a lifelong autoimmune condition where the body's immune system reacts to gluten, a protein found in wheat, barley and rye. The body's reaction to gluten causes damage to the lining of the intestine, the place where food and nutrients are absorbed. This deprives the body of the nutrients it needs and can lead to malnutrition.

People with undiagnosed and untreated coeliac disease can have a wide range of symptoms. Many of the symptoms are related to the damage in the gut, while others are the result of the body being starved of nutrients.

WHAT ARE THE SYMPTOMS AND WHO IS MOST AT RISK?

Coeliac disease has a range of symptoms that affect different people in different ways. People often report typical gut symptoms, but other parts of the body can also be affected. The most commonly reported symptoms are:

- · frequent bouts of diarrhoea or loose stools
- · nausea, feeling sick and vomiting
- stomach pain and cramping
- · lots of gas and bloating
- · feeling tired all the time, ongoing fatigue
- anaemia (you would be told if you're anaemic following a blood test)

- weight loss (although not in all cases)
- regular mouth ulcers
- constipation or hard stools
- Dermatitis Herpetiformis (DH), the skin manifestation of coeliac disease.

Around 1% of the UK population has coeliac disease, but only 24% of those with the condition have been diagnosed. This means that around half a million people in the UK are, as yet, undiagnosed. Coeliac disease is a genetic condition, so while it affects around one in 100 people in the UK, if you have a first degree family member (parent, sibling or child) who has coeliac disease, then your chances of having the condition increase to one in ten.

People with coeliac disease are also more likely to have other autoimmune conditions, including Type 1 diabetes and autoimmune thyroid disease. If you have one of these conditions, it is important that you are also tested for coeliac disease.

Lots of people diagnosed with coeliac disease were previously diagnosed with Irritable Bowel Syndrome (IBS), as the symptoms often look similar. If you have been diagnosed with IBS in the past, still have symptoms, and haven't been checked for coeliac disease before, you should ask to be tested.

If you have symptoms like these or any of the conditions mentioned here, it's worth asking, is it coeliac disease?



Dermatitis Herpetiformis (DH), the skin manifestation of coeliac disease. Around one person in 3,300 is diagnosed with DH.

HOW DO I GO ABOUT GETTING DIAGNOSED?

The first step to getting diagnosed with coeliac disease is to have a simple blood test at your GP surgery. The test looks for the antibodies produced by people with coeliac disease when they eat gluten. It is **essential** to keep eating gluten before and throughout the testing process, otherwise your body won't produce antibodies and you could get a false negative result. Gluten must be eaten in more than one meal every day for six weeks before testing.

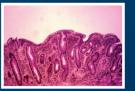
If the blood test is positive you will be referred for an endoscopy with a biopsy. This involves a small camera being passed through your mouth and stomach, then into the small bowel. Small samples of the lining of the small bowel are collected and then looked at for signs of coeliac disease. For some children, a biopsy may not be needed. See www.coeliac.org.uk/coeliac-disease-in-children for more information.





Healthy intestine





Intestine damaged by coeliac disease G.B. Gasbarrini and F. Mangiola, 2014