

Question 23 – Week of January 14

A thirty five year old female presents having read about celiac disease. She is on a gluten free diet and thinks she has celiac disease. She finds whenever she eats a diet high in wheat flour she feels bloated and gets diarrhea. She presents on a gluten free diet feeling much improved but wishes for you to confirm her self-diagnosis, but refuses invasive testing for now. You complete a thorough work up. She is HLA DQ 2 negative and DQ 8 negative, TTG IgA negative, IgA 100 mg/dL (normal ≥ 70 mg/dL) and DGP IgG Ab negative. The next appropriate step in this patient's care is:

- A. Trial of a tricyclic antidepressant for IBS, with no further testing needed
- B. Encourage her to agree for an EGD with small bowel biopsy to reach a conclusion one way or another
- C. Advise performance of a video capsule endoscopy, a non-invasive alternative to EGD with biopsy for celiac diagnosis
- D. Let her know she has gluten intolerance and she may continue to do well on her gluten free diet

Answer: D

Non-celiac gluten intolerance is a real entity likely secondary to intestinal endopeptidase deficiencies causing gluten maldigestion. Biesiekierski et al AJG 2011 prospectively studied 34 gluten-intolerant non-celiac IBS patients and blindly-randomized them to gluten exposure with a gluten or gluten-free muffin daily. 13/19 (68%) in the gluten group vs. 6/15(40%) in the gluten-free group had poor symptom control (p=0.0001).