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Abstract

TITLE: Current clinical spectrum of Celiac Disease in an adult Hospital-based population in Argentina. Improvement of awareness of extraintestinal presentation.

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ABSTRACT BODY: Celiac Disease (CD) is a systemic disease no longer considered to be restricted to the intestinal tract. Various clinical forms have been increasingly recognized including those in which G.I. or abdominal symptoms are absent. The changing clinical spectrum of CD prompted us to analyze our adult hospital-based population

Aim: (1) To evaluate the clinical presentation which triggered the medical work-up leading to diagnosis of CD. (2) To identify the current contribution of Hospital Departments (excluding Pediatrics) to CD diagnosis. (3) To assess recent changes in the awareness of CD

Materials and Methods: Out of 222 cases with a confirmed diagnosis of CD (serologic test (tTGA & EMA) + intestinal histology; 2002 through 2007), 15 failed a blinded review of diagnostic biopsy, 63 lacked clinical information, and in 72 the reason for serologic testing was unavailable and were thus excluded. We analyzed, the signs/symptoms prompting specific CD diagnosis work-up in 72 patients, female: 3.2:1, age x: 45y range: 17-75y. The referring clinical Department responsible for CD suspicion was recorded. The change in awareness of CD was explored through the number of performed serologic tests/y and the ratio between n of serologic tests/y corrected by n consultations/y (NT/NC)

Results: Symptoms leading to suspicion of CD (n=116) were diarrhea /abdominal pain in 44, anemia 27, autoimmune disease 15, skin manifestation 6, osteoporosis 6, chronic fatigue 5, elevated ALT 5, family history of CD 4, other 4

Diagnosis according to referring Department (%): Gastroenterology 50, Endocrinology 21, Internal medicine 18, Hematology 8, Dermatology 1, Rheumatology1, Gynecology 1, Neurology 1. The n of serologic tests for CD/y increased from 793 on 2003 to 1627 on 2007, a 205% increase (p:<0.05). NT/NC increased 70% from 0.63 on 2003 to 1.08 on 2007

Conclusions: 1. Anemia, diarrhea and abdominal pain were the leading symptoms arising suspicion of CD. 2. Regarding the Medical Departments involved in CD diagnosis, Gastroenterology was still responsible for 50% of cases. However, Internal Medicine, Hematology and Endocrinology generated a almost similar n of CD diagnoses (47%) probably reflecting an increased awareness of the multiple forms of CD 3. The ratio relating number of serologic test per number of consultations per year, increased by 70% from 2003 through 2007 confirming a true increase in awareness of CD

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Disclosure Status

The following authors have completed their 2009 DDW disclosure:

Ignacio Zubiaurre: Disclosure completed

David Mackenzie: Disclosure completed

Luis Cisneros: Disclosure completed

Lucrecia Koll: Disclosure completed

Luis Colombato: Disclosure completed

