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| An approach to testing for coeliac disease | |
| **Patient eating gluten? YES ↓** | NO → gluten challenge: 2 slices bread/day for 2–8 weeks then coeliac serology  If serology negative at 2 weeks then continue with challenge and repeat serology at 8 weeks |
| **Coeliac serology** | IgA-tTG +/– IgA-EMA +/– IgA-DGP; total IgA levels |
| **Negative serology** | IgA low +/– IgG test if available IgA normal and low index of suspicion → NOT CD IgA normal and high index of suspicion → refer for specialist review Consider HLA DQ2 and DQ8 testing → negative test rules out CD |
| **Positive serology** | Refer for duodenal biopsy\* |
| **\*Duodenal biopsy (with multiple biopsies from the proximal duodenum) is required to confirm the diagnosis of CD. Other conditions that can give an elevated tTG include type 1 diabetes, inflammatory bowel disease, liver disease and other autoimmune diseases tTG, tissue transglutaminase; EMA, endomysial antibody; DGP, deamidated gliadin peptide; IgA, immunoglobulin A** | |

<http://www.racgp.org.au/afp/2014/october/coeliac-disease-where-are-we-in-2014/>

reference 15 and 16 needed