



## Prevention in children and adolescents AEPap/PAPPS

### Celiac disease prevention and screening

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#### RECOMMENDATIONS

Celiac disease (CD) is a permanent intolerance to gluten. It produces harm to the proximal small intestine mucosa. Currently the diagnostic criteria admits a tenfold increase from normal values of the serological markers. Coeliac disease prevalence, in different countries and geographical areas, has expanded in the last years, due partially to the generalized use of serological markers, which have permitted us to know the existence of latent and silent presentations of CD. The classical presentation of CD is nowadays exceptional. In Spain, the prevalence is 1:389 for adults and 1:118 for children. Albeit sensible and specific tests exist for such a frequent disease as CD, the benefit of bringing to light latent and silent forms is not clear, as neither is the outcome, the adherence to gluten free diet or the adverse events of diet in CD asymptomatic presentations.

Screening of high-risk population is recommended: first and second familiar degree of CD patients, Down, Turner and Williams's syndrome, and in general patients with autoimmune diseases such as Type 1 Diabetes, thyroiditis, rheumatoid arthritis, etc. CD screening is also recommended in anemia of unknown origin, osteoporosis, short stature children, women with history of repeated miscarriages and infertile couples.

Gluten has been proposed to be introduced in weaning no later than 6 months after birth, in small, increasing quantities, and while breastfeeding. However, neither of these measures has proved effective as a means of preventing the later appearance of celiac disease.

#### Recommendation

1. PreInfad suggests against general population celiac disease screening.
2. PreInfad recommends celiac disease screening in children, adolescents and adults of risk groups\*.

3. Previnfad recommends against primary prevention measures, such as introducing gluten in a time window (between 4 and 6 months after birth), its chronologic coincidence with breastfeeding or its progressive introduction, because they do not influence the later development of celiac disease.

\*Relatives of CD patients until a 2° degree, Down, Turner, Williams and other syndromes, anemia, infertility, osteoporosis, short stature of unknown origin and autoimmune diseases.