

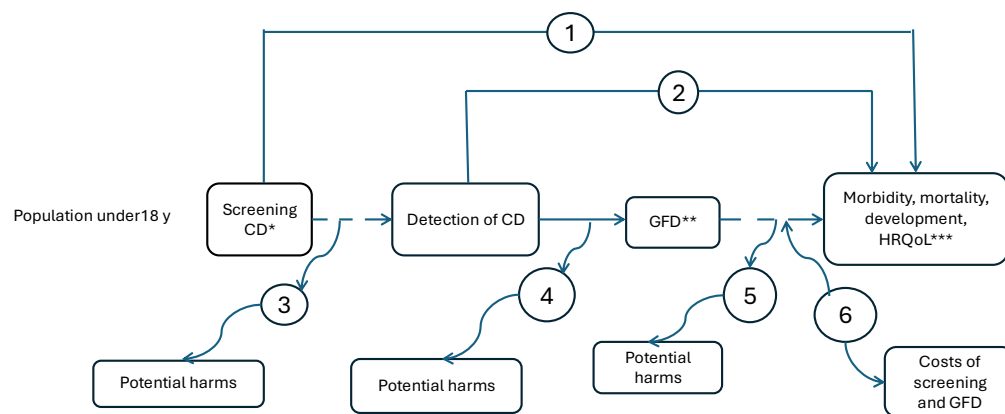
## PREVENTION AND SCREENING OF CELIAC DISEASE

Author: José Galbe Sánchez-Ventura and the PrevInfad Group

Category: Digestive System

Last updated: 4/1/2025

Fig 1. Analytical Framework. Screening for Celiac Disease



*Adapted and authorized by the USPSTF*

\*CD: Celiac Disease, \*\*GFD: Gluten-Free Diet, \*\*\* HRQoL: Health-Related Quality of Life

### Clinical Questions

1. Does screening for celiac disease (CD) in individuals under 18 years of age improve morbidity and mortality, quality of life, or developmental disorders caused by the disease?
2. Does early detection of CD in individuals under 18 years of age improve morbidity and mortality, quality of life, or developmental disorders caused by the disease?
3. What are the potential harms associated with CD screening?
4. What are the potential harms of early detection of CD?
5. What are the harms associated with a gluten-free diet (GFD)?
6. What are the costs of screening and of the GFD?

---

## Related Clinical Questions

7. What is the adherence to the GFD among patients diagnosed with CD?
8. Does the introduction of gluten into the diet in larger daily amounts or at a certain age influence the later development of CD?
9. Does the introduction of gluten during breastfeeding reduce the likelihood of later development of CD?

## PrevInfad Recommendations

Screening Type	Strength of Recommendation	Recommendation
<b>Universal screening in individuals under 18 years of age</b>	Weak against	Suggest not to perform
<b>Screening in risk groups</b>	Strong in favor	Recommended
<b>Combined HLA and tTGA testing</b>	Strong in favor	Recommended
<b>If finger-prick micromethods are available, perform HLA testing first</b>	Strong in favor	Recommended
<b>If HLA DQ2/DQ8 is negative, do not perform further screening unless symptoms of celiac disease are present</b>	Strong against	Not recommended

## Recommendations Based on Good Clinical Practice

Monitor the possibility of poorer Health-Related Quality of Life (HRQoL) and mental health issues in children with celiac disease (CD), especially adolescents, those with social difficulties, and those with poor adherence to a gluten-free diet (GFD).
Closely monitor adherence to the GFD in children with CD.

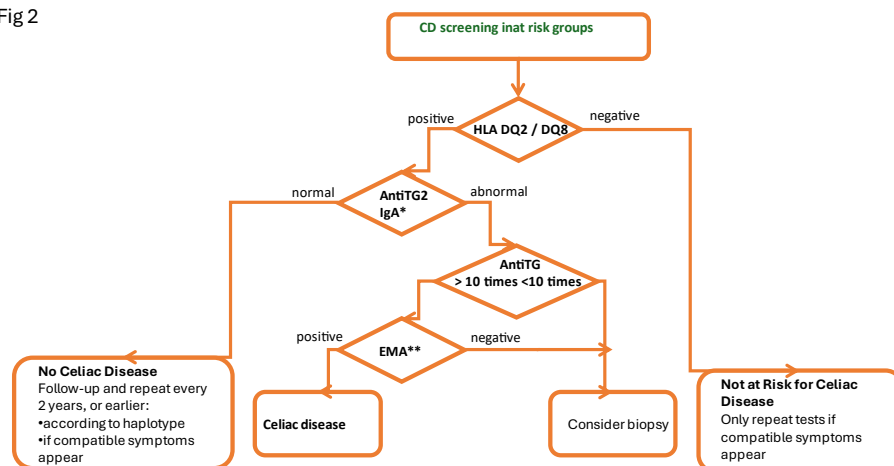
Promote family education about CD and the GFD in families of children with the condition.

There is no high-quality evidence linking the development of CD with breastfeeding, weaning, or the amount of gluten consumed.

Human milk is recognized as the ideal food for all infants due to its proven health benefits for both mother and child. The WHO and other organizations recommend exclusive breastfeeding for the first six months and continued breastfeeding, along with complementary foods, for at least two years.

<https://previnfad.aepap.org/recomendacion/lactanciamaterna-rec>

Fig 2



\* Ac anti t transglutaminase IgA \*\* Ac AntiendomysialIgA

**The author declares that he has no conflicts of interest related to the subject matter of this document.**

#### **How to cite this article:**

Galbe Sánchez-Ventura J. *Prevention and screening of celiac disease.*

PrevInfad/PAPPS [online]. Updated April 1, 2025. [accessed DD-MM-YYYY].

Available at: <https://previnfad.aepap.org/recomendacion-en/celiaca-enrec>