

Facts about

Coeliac disease/Gluten intolerance
Dermatitis Herpetiformis

The Swedish Society for Coeliacs

for those allergic to gluten, lactose, milk protein and soy protein.

Coeliac disease/Gluten intolerance

Today, coeliac disease, also known as gluten intolerance, is a common hereditary disease. Coeliac disease is a life-long disease that is caused by a hypersensitivity to proteins in gluten that are found in wheat, rye and barley. If a person with gluten intolerance eats gluten, it damages the small intestine. Today, research shows that the occurrence of coeliac disease is at least 1 in 100, which means that at least one person out of every one hundred has the disease, but most do not even know they have it.

Symptoms

In children, coeliac disease presents itself when they begin to receive food that contains gluten. Common symptoms include poor weight gain, vomiting and diarrhoea or constipation. Many children also experience mood swings and become grumpy, irritated and tired.

Children under the age of two with undiscovered coeliac disease often look malnourished and have a distended belly. Many older children are of normal weight, but are short in stature. Anaemia and delayed puberty are common symptoms among teenagers with untreated coeliac disease.

The symptoms can manifest themselves at any time during life. Many adults have had ailments that have been wrongly interpreted for many years. Fatigue, weight-loss, osteoporosis and depression may not primarily lead thoughts to an intestinal disorder. Other symptoms can include diarrhoea, constipation, reduced fertility, vitamin or mineral deficiencies or anaemia. Sometimes, coeliac disease is discovered among people who feel healthy.

Making a diagnosis

If coeliac disease is suspected, a blood test is taken where serologic markers for coeliac disease are measured. But to make a diagnosis, one needs to take a small sample (a biopsy) of the small intestine's mucous membrane. The sample is taken in an examination called a gastroscopy and is completely safe, but can be perceived as unpleasant. The sample is then examined under a microscope.

The intestine is normally covered with intestinal villi, which have the task of absorbing the nourishment from the food. With coeliac disease, the intestinal villi are smoothed out. The damaged mucous membrane then has difficulty absorbing nourishment, which explains most of the symptoms. If the symptoms disappear and the serologic markers normalise after a time with a gluten-free diet, a diagnosis of coeliac disease can as a rule be established. Sometimes, another biopsy is also required that shows that the intestinal mucous membrane has healed on a gluten-free diet, before the diagnosis can be completely certain.

It is important to not experiment with a gluten-free diet on one's own before a gastroscopy has been done, because the test results can be misleading. Blood tests cannot with certainty show if one has coeliac disease or not, but it can be an indicator as to whether gastroscopy with a biopsy should be done.

Treatment

Eating food without gluten is the treatment. There is a broad range of gluten-free replacement products, which are available in the vast majority of grocery stores and at chemist's. Products of wheat, rye and barley are replaced with gluten-free flour and grain types.

The gluten-free food must be maintained for the rest of one's life because coeliac disease is a life-long disease. It is important to always follow the diet, otherwise one could suffer malnourishment and complications even if one has no noticeable symptoms. After a period with a gluten-free diet, the mucous membrane is most often restored and disease symptoms disappear. One lives as usual, but with a different, more expensive diet.

Oats in the gluten-free diet

More recent research shows that specially cultivated oats, which are free from wheat, rye and barley, can be included in the gluten-free diet. For a long time, oats were believed to belong to the types of grains not tolerated, but research shows that the protein avenin that is found in oats differs somewhat from the proteins in wheat, rye and barley, and that people with coeliac disease can eat pure oats without damaging the intestinal mucous membrane.

Oats have several benefits since they are rich in fibre and contain minerals and vitamins including iron, zinc and thiamine. Moreover, oats contribute to a good taste, are easy to use in cooking and are inexpensive to buy. Only specially cultivated oats are recommended. One should introduce the oats in the diet gradually so that the stomach and intestines can adjust to the higher fibre content.

Letting oats be a part of the gluten-free diet is now widespread in the Scandinavian countries while in other countries it is not yet permitted, probably because oats are not used in their cuisine.

Pure oat products may not yet be called or sold under the designation of gluten-free. Nor can a dish or bread be served and called gluten-free if oats are included. If one wants to serve something that is gluten-free and contains pure oats, the person with coeliac disease must be asked first.

Dermatitis Herpetiformis (DH)

Dermatitis Herpetiformis (DH) is a chronic skin disease with heavily itching blisters on flush skin. Approximately 1 in 4000 have DH and the disease is twice as common among men as among women. The indicators of DH are irritated skin with itching blisters on elbows, knees and buttocks. DH is caused by gluten hypersensitivity, but it is not as pronounced as in coeliac disease. Consequently, only some patients have symptoms as in coeliac disease, such as diarrhoea, fatigue, vitamin and mineral deficiency. To make a diagnosis, a skin biopsy is taken. A small piece of skin (3 mm) is taken, usually from the buttocks, and is examined under a microscope. In DH, antibodies in the skin form a special pattern.

In most cases, a gluten-free diet cures the skin symptoms and normalises the intestinal mucous membrane. The severity of the skin symptoms vary from person to person. The medicine, Dapsone, helps against the skin ailments, but has no effect on the damage to the intestines. In minor cases, a cortisone ointment may suffice.

Would you like to know more?

We have more knowledge and information we can give you. You are welcome to become a member!

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