



SHOULD YOU BE GLUTEN-FREE? CELIAC DISEASE & NON-CELIAC GLUTEN SENSITIVITY

What is Celiac Disease?

- A genetic autoimmune disease that damages the small intestine and interferes with the absorption of nutrients from food when gluten, the protein found in wheat, barley and rye, is ingested.
- Celiac disease affects 1% of the general population, or 1 in 133 Americans. Onset can occur at any age.
- Multiple systems are affected by undiagnosed celiac disease, resulting in a myriad of symptoms including gastrointestinal distress, chronic fatigue, osteoporosis, anemia, nutritional deficiencies, and reproductive health issues. Symptoms vary from person to person, and some may experience no symptoms at all. The time between initial exposure to gluten and onset of symptoms is typically weeks to months/years.
- A simple blood test, tissue transglutaminase (tTG), is the first step in receiving a diagnosis. *(It is important to continue eating a normal, gluten-containing diet before being tested for celiac disease).* A small intestinal biopsy is needed to confirm the diagnosis.
- Left undiagnosed and untreated, celiac disease can lead to further complications such as osteoporosis, infertility, other autoimmune conditions such as thyroid disease, and cancer.

The only treatment is a strict, lifelong, 100% gluten-free diet.

What is Non-Celiac Gluten Sensitivity?

- A non-specific immune response that has been clinically recognized as less severe than celiac disease. NCGS is not accompanied by “the enteropathy, elevations in tissue-transglutaminase, endomysium or deamidated gliadin antibodies, and increased intestinal permeability that are characteristic of celiac disease.” It causes possible but minimal intestinal damage that recedes with a gluten-free diet. NCGS does not appear to be genetically based.
- The research on NCGS is only in its infancy, but it is estimated to affect 6% of the population, or 18 million Americans. It is thought to affect primarily adults.
- There is some overlap of symptoms with celiac disease such as abdominal pain, fatigue, headaches, tingling/numbness, “foggy brain,” but often non-intestinal symptoms prevail. Symptoms typically appear hours or days after gluten has been ingested.
- No laboratory or histological tests can currently diagnose NCGS, making the diagnosis a process of exclusion. Both celiac disease and wheat allergy must be ruled out through testing before proceeding to an elimination diet, followed by a monitored gluten-challenge.
- Early research indicates that undiagnosed and untreated NCGS is not thought to cause long-term complications, but more investigation is needed.

Source:
Ludvigsson *et al.*, 2012
Sapone *et al.*, 2011
Sapone *et al.*, 2012

Patients: www.CeliacCentral.org
Healthcare Providers: www.CeliacCMCEnter.com