Communicating openly and honestly with your healthcare provider is important and necessary for your health.

At your next visit, explain why you need to be tested for celiac disease and ask for the celiac disease blood test.

Family Link
Celiac disease runs in families. Blood relatives of people diagnosed with celiac disease have a much higher risk for also developing this serious genetic autoimmune condition.

Symptoms
Celiac disease presents in many ways and can affect almost all body systems. Each person has different symptoms and many people don’t have any signs or symptoms at all. Talk to your doctor about any new symptoms or changes in your body that you may be experiencing.

Testing
A celiac disease blood test is the first step in learning if a person has celiac disease. It can easily be ordered by most doctors, including family physicians and gastroenterologists, and is covered by most insurance plans. Experts recommend the IgA-tissue transglutaminase (tTG) test as the best single test for celiac disease. Some doctors may order a “celiac panel” to test for celiac disease; it’s important to make sure that the tTG is included in the panel.

Health Risks
Left undiagnosed or mismanaged, celiac disease increases the risk for future health complications including certain types of cancer, bone disease and the development of other autoimmune diseases. Once properly treated and managed, the body works to restore its health.
The celiac disease blood test – IgA tTG –
has a very high rate of identifying the disease and can be ordered at your next
doctor visit. Most people with celiac disease remain undiagnosed or misdiagnosed
with another condition – including family members who are genetically at-risk.
Because the long-term complications of untreated or mismanaged celiac disease are
serious, it’s important to be tested.

Remember to stay on a regular, gluten-containing diet before being
tested to ensure accurate results.

Testing should be considered in people with any of the following signs,
symptoms or conditions:

- 1st or 2nd degree relative with celiac disease
- Autoimmune thyroid disease
- Bloating, gas and/or abdominal pain
- Delayed puberty
- Diarrhea or constipation
- Discolored teeth or loss of enamel
- Down syndrome or other trisomies
- Early onset or unusually severe osteoporosis or osteopenia
- Fatigue
- Irritable bowel syndrome (IBS)
- Itchy skin rash, including dermatitis herpetiformis
- Malabsorption
- Nutritional deficiencies, including folic acid, iron deficiency anemia, vitamin B12, vitamin D and zinc
- Short stature (children)
- Type 1 diabetes
- Unexplained fertility issues
- Unexplained liver test abnormalities
- Unexplained neurological disorders including ataxia, a foggy mind, peripheral neuropathy and severe headaches

What to do if your...

...doctor is hesitant to order the celiac disease blood test:
You are the best advocate for your health. Explain to your doctor that while they may think it’s unlikely you have celiac disease, it’s important to you and you’d like to find out for sure.

...blood test is positive:
Schedule an appointment with a gastroenterologist to discuss next steps and what’s involved in the diagnosis process from start to finish. Your family member can be a great resource for navigating this process and may be able to suggest a gastroenterologist who specializes in celiac disease.

...blood test is negative:
It is possible to continue to be at risk for developing celiac disease even if previous blood test results have been negative. Because celiac disease can develop at any time and at any age, it is important to have a follow-up celiac disease blood test every two or three years.

Learn more at: www.SeriouslyCeliac.org

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