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CLINICAL, SEROLOGICAL AND HISTOLOGICAL FEATURES OF CELIAC DISEASE IN THE ADULT POPULATION
A TERTIARY CARE HOSPITAL EXPERIENCE

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ABSTRACTE

OBJECTIVE: *To determine clinical & histological presentation of celiac disease at ISRA University Hospital Hyderabad.*
DESIGN: *Cross sectional study*
PLACE & DURATION: *ISRA University Hospital Hyderabad; from March, 2007 to February, 2008.*
METHODS: *All consecutive patients full filling the inclusion criteria were enrolled in to this study. After consent a separate pro forma was filled for each case to record demography and data about clinical presentation and laboratory investigations. The diagnosis of celiac disease was made on the basis of the serological and histological features consistent with celiac disease.*
SAMPLING TECHNIQUE: *Convenient sampling*
INCLUSION CRITERIA: *The adult patients clinically suspected of celiac disease or had refractory iron deficiency anemia.*
EXCLUSION CRITERIA: *The cases having clinical features suggestive of CD with normal serological tests; the cases with serological study consistent with CD but did not agree for carrying out duodenal biopsy and the cases of abdominal tuberculosis, giardiasis or chronic pancreatitis.*
RESULTS: *Fifty cases full filled the inclusion criteria and were enrolled in to this study. Thirty (60.0%) were females and 20 (40.0%) males; mean age was 33.25 ± 9.7 years. Of 50 cases 44 (88.0%) presented with classic or typical features of celiac disease where as 6 (22.0%) presented with atypical features.*
CONCLUSION: *The celiac disease is not uncommon in adult population of our country. It is more prevalent in females as reported elsewhere; majority of adult patients has typical gastrointestinal symptoms of disease. We assume that CD has been hitherto, underground in our country.*

KEY WORDS: Celiac disease, clinical presentation, ISRA.

INTRODUCTION:

Celiac disease (CD), also known gluten-sensitive enteropathy is an autoimmune disorder of small bowel triggered in genetically susceptible individual by gluten which is present in wheat, barley and rye. It affects up to 1% population of several developed countries [1-3]. The typical clinical features of celiac disease in adults are diverse and usually like malabsorption syndrome but sometimes may be absent or very subtle. As a result celiac disease in adults shows an iceberg phenomena[4].

There had been a notion and wide belief that celiac disease is a disease of children. It is now recognized that children with celiac disease, in whom the diagnosis is delayed present later in life either with typical manifestations such as chronic diarrhea and malabsorption or with atypical manifestations like short stature, refractory anemia, metabolic bone disease or dental enamel defects.[5, 6]. A significant number of adult patients with celiac disease remain either silent or asymptomatic[7]. In some reports celiac disease has been recognized as late as 70 years of age [8].

In South Asia, tropical sprue has been considered to be the most common cause of malabsorption in adult, but celiac disease is now surfacing as an important cause of malabsorption syndrome[5]. In recent years celiac disease has been recognized much more