

SCREENING FOR CELIAC DISEASE IN BULGARIA – 8 YEARS EXPERIENCE

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Introduction: During the past three decades the general concept of the natural history of celiac disease (CD) changed completely. The “iceberg” model of CD called for an active case-finding policy in certain groups of patients.

Aims: To screen pediatric IDDM patients, first-degree relatives of CD-patients and Down syndrome patients for estimating prevalence of CD. **Methods:** 265 IDDM patients (120F/145M); 92 first-degree relatives of 56 CD-children and 2 Down-syndrome patients were screened by means of AGA, EMA and t-TG. Small intestinal biopsy (SIB) was performed in 7 out of 11 EMA-positive patients. After 2 years on gluten-free diet (GFD) we reevaluated these patients.

Results: 7/265 IDDM patients were found EMA-positive, SIB was performed in all of them, the diagnosis of CD was confirmed. Two years later 1/7 patients was EMA-positive, she was non-compliant with diet. All the other children were EMA negative, they experienced normal development, they had much better control on HbA1c. The family screening detected 3 mothers EMA positive. The diagnosis of silent CD was confirmed by SIB in 2 of them. GFD was strictly kept by them. The discrete symptoms of fatigue, tiredness, bad mood were improved. SIB was not performed in Down syndrome patient, the GFD was not kept.

Conclusion: The prevalence of CD among IDDM patients is 2,64%. GFD has been introduced after histological confirmation of CD. The prevalence of CD among first-degree relatives is 3,26%. We have not found any CD-sibs. CD has high frequency among Down syndrome patients. We recommend screening of high-risk groups.

