154.00

PREVALENCE OF COELIAC DISEASE IN AUSTRIA

A.C. Hauer[1], **J. Deutsch**[1], G. Lanzer[2], H. Stenzl[5], W. Erwa[1], U. Goriup[1], A. Eherer[3], D. Weber-Mzell[1], S Haitchi-Petnehazy[1], E. Marx-Neuhold[1], N. Lanner[1], J. Haas[4], M. Hartmann[6]
[1]Universitaetsklinik Fuer Kinder- Und Jugendheilkunde Der Univ. Graz Graz Austria [2]Univ.-Klinik Fuer Blutgruppenserologie Und Transfusionsmedizin Der Univ. Graz Graz Austria [3]Klinische Abteilung Fuer Gastroenterologie Der Univ.-Klinik Fuer Innere Medizin Der Univ. Graz Graz Austria [4]Universitaetsklinik Fuer Geburtshilfe Und Gynaekologie Der Univ. Graz Graz Austria [5]Univ.-Graz, Stellungskommission Des Oesterr. Bundesheeres Graz Graz Austria [6]Institut Fuer Histologie Und Embryolgie Der Univ.-Graz Graz Austria;
johann.deutsch@uni-graz.at

Background: In 1975, prevalence of coeliac disease (CD) in Austria was 1:496, the second highest of Europe at the time. Diagnosis was based on clinical symptoms and histology.
Aim of the study: To reevaluate the actual prevalence of CD using serological screening methods and to know whether it is still one of the highest in Europe.
Methods: For ethical reasons the screening had been designed as a blood withdrawal study including a) „healthy“ blood donors (BD) and b) male adolescents (MA) liable for military service. Each sample was double-checked for quantitative IgA and endomysial antibodies (EMA). Human umbilical cord (HUC) continued to serve as the antigenic substrate after having tested 1000 samples also using monkey oesophagus with a 100% correlation. EMA-positive (+) subjects and those with extreme IgA deficiency (<0.07 mg/l) were invited to have a diagnostic work-up including duodenal biopsy.
Results: a) 10/4268 BD (female: 2265 male: 2003) were EMA+ (assumed prevalence: 1:427), six of whom agreed to have a biopsy with five being diagnosed as CD b) Among 3036 MA, 8 were known coeliacs, having clinically presented „typically“ at <15 months (1/380). Another 11 have now found EMA+. On biopsy, 8 were proven CD (1/190).
Conclusion: 1) Lacking acceptancy of a duodenal biopsy left the screening of „healthy“ BD as an unsatisfactory method for estimating the prevalence of CD in Austria.
3) HUC as the antigenic substrate proved to be a reliable and economic alternative to monkey oesophagus
4) The praevalence of CD in MA was 1/190