ANTIGLIADIN AND ANTIENDOMYSIAL ANTIBODIES IN SHORT-STATURE CHILDREN

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Short-stature children from Slavonia and Barania (the easter part of Croatia) whose height is below the 5th percentile are admitted to the Endocrinology Division of the Departent of Pediatrics of the Clinical Hospital Osijek. In the past two years, a total of 951 children was admitted to the Department, 462 in 2001 and 589 in 2002. Short stature was the reason for admission of 98 children (10.3%), or 34 and 58 respectively. Diagnostic work-up comprises routine laboratory findings, exclusion of chronic diseases by means of appropriate gastroenterological, neurological and/or psychological procedures, radiological measurements of the bone age and determinations of the hormone levels, including the growth hormone in the insulin tolerance test. Since 2001, measurements of the antigliadin and antiendomysial antibodies have been added to the diagnostic schedule. In 5 of 98 children (5,1%) whose heights and weights were below the 5th percentiles, antigliadin and antiendomysial antibodies were detected. Anamnestic data indicating possible malabsorption were negative and the hormonal levels were normal, including the growth hormone secretion. Introduction of gluten-free diets resulted in accelerations of the growth rate as judged by one-year follow-ups. Our experience indicates that clinical evaluation of short-stature children should not neglect an inapparent malabsorption and that measurements of antigliadin and antiendomysial antibodies may help recognize it.