

Membership of Coeliac UK?

- Signpost to Coeliac UK Helpline 0333 3022 2033 or **coeliac.org.uk** for additional support
- Using member benefits? Food and Drink Information, Venue Guide, Helpline, social media networks, Local Groups
- Coeliac UK's food and symptom diary completed?

Measure weight and height and BMI

- Weight gain after diagnosis is common due to improved absorption
- Unintentional weight loss - **Red flag indication**

Review symptoms

- Gastrointestinal symptoms (constipation, diarrhoea, nausea, vomiting)
- Mouth ulcers
- Fatigue
- Neurological symptoms (headache, peripheral neuropathy, ataxia)
- New or unchanged symptoms – **Red flag indication**

Assess the need for specific blood tests

- Screening for anaemias - full blood count and ferritin
- Associated autoimmune conditions – thyroid function tests, liver function tests
- Assessment of nutritional deficiencies – folate, vitamin B12, vitamin D and serum calcium

Review Nutritional Status

Stay up to date on the latest developments on the diagnosis and management of coeliac disease at coeliac.org.uk/healthcare-professionals

To access our quarterly email newsletter and exclusive HCP member resources, join at coeliac.org.uk/joinusHCP

- Review of supplements prescribed/purchased over the counter
- Calcium intake (diet and supplements). Adults with coeliac disease should have at least 1,000 mg calcium/day
- 5 mg folic acid supplementation should be prescribed 3 months pre-conception and for the first 3 months of pregnancy

Assess adherence to the gluten free diet

- Tissue transglutaminase (TtG) alone is not a good marker to evaluate adherence or ongoing villous atrophy in patients established on a gluten free diet
- Key points and questions to consider asking:
 - How do you check if a food is suitable?
 - **Do you have any difficulties with reading food labels?**
 - What symptoms do you experience after eating gluten?
 - Even if asymptomatic, gluten causes damage to the gut
 - How do you manage your diet when eating out or travelling?
 - Are gluten free oats included in your diet?
 - **Have any nutritional deficiencies improved since diagnosis?**
 - Steps taken to prevent cross contamination? (e.g. separate toaster/toaster bags, different butter/spreads to prevent cross contamination)
- Access to and affordability of gluten free foods
 - Access to gluten free food on prescription
 - Product discounts and gluten free meal plans examples are available from Coeliac UK

Assessment of bone health

- Consider the need for a dual energy X ray absorptiometry (DEXA) scan (in line with the NICE guideline on osteoporosis: assessing the risk of fragility fracture) or active treatment of bone disease
- Signpost to coeliac.org.uk/osteoporosis

Check vaccination status

- Vaccination recommendations are based on the increased prevalence of hyposplenism in people with coeliac disease
- Pneumococcal vaccine and booster every 5 years
- Meningococcal A, C, W, Y vaccine for those born between 1995 and 2014
- Consider need for flu vaccine on individual basis
- More information at coeliac.org.uk/vaccinations

Consider mental health assessment

People with coeliac disease may experience anxiety and depression

Consider referral to another healthcare professional

- Refer to dietitian if concerns about dietary adherence, concerns about nutritional status or a need for further dietary education is identified
- Refer to gastroenterologist if red flag indications are present
- Refer to osteoporosis clinic if necessary following assessment of bone health
- If non responsive or refractory coeliac disease is suspected, see coeliac.org.uk/rcd for details of specialist support