

Shared Care Recommendations for Coeliac Patient At Annual Follow Up

Prior to the recommendation for shared care, all newly diagnosed patients should have had duodenal biopsies, serology, ferritin, folate, calcium, vitamin B12, folic acid, DEXA scan and dietitian referral initiated and be given a trust information leaflet and follow up card.

CCG agreed shared care recommendations for stable coeliac disease patients.	
Vaccinations (Providing no contraindications)	
Patients with coeliac disease can have hyposplenism resulting in higher risk of infection from encapsulated bacteria	
On Diagnosis	<ul style="list-style-type: none"> • Haemophilus influenza B • Streptococcus pneumonia • Meningitis C - ACWY conjugate
Annually	<ul style="list-style-type: none"> • Influenza
Blood Monitoring	
Every 12 Months;	
<ul style="list-style-type: none"> • FBC • LFT's • U&Es • Bone profile • Vitamin B12 • Folate • Ferritin • TTG (If persistently elevated despite adherence to gluten free diet please re-refer to clinic) 	
Bone Density Monitoring	
DEXA scan;	
On diagnosis - there after follow recommendations on dexa-scan report	
Unless indicated earlier repeat DEXA scan	
once at 55 years for men	
once at menopause for women	
or if suspected fragility fracture	
Lifestyle Check (Documented in GP notes)	
Gluten free diet adherence including nutritional advice and supplements as required	
Weight and height measurement	
Gluten free product prescription	
Recommend membership of coeliac disease advocacy group	
Familial Considerations	
Serology testing (TTG) for all first degree relatives	
Patients will receive guidance on their annual review before discharge for GP shared care	
Developed using;	
NICE Guidelines (NG20) <u>Coeliac Disease: recognition, assessment and management</u> – September 2015	
<u>Diagnosis and management of adult coeliac disease: guidelines from the British Society of Gastroenterology</u> – Ludvigsson, Bai, Biagi et al - June 2014	

Please re-refer to gastroenterology urgently on 2ww, if patient presents with any red flag GI symptoms.

For any non-urgent enquiries such as;

- Persistent symptoms at GP annual follow up despite gluten free diet
- Re-present with persistent symptoms
- If on reviewing annual bloods you have any concerns regarding coeliac related abnormalities

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