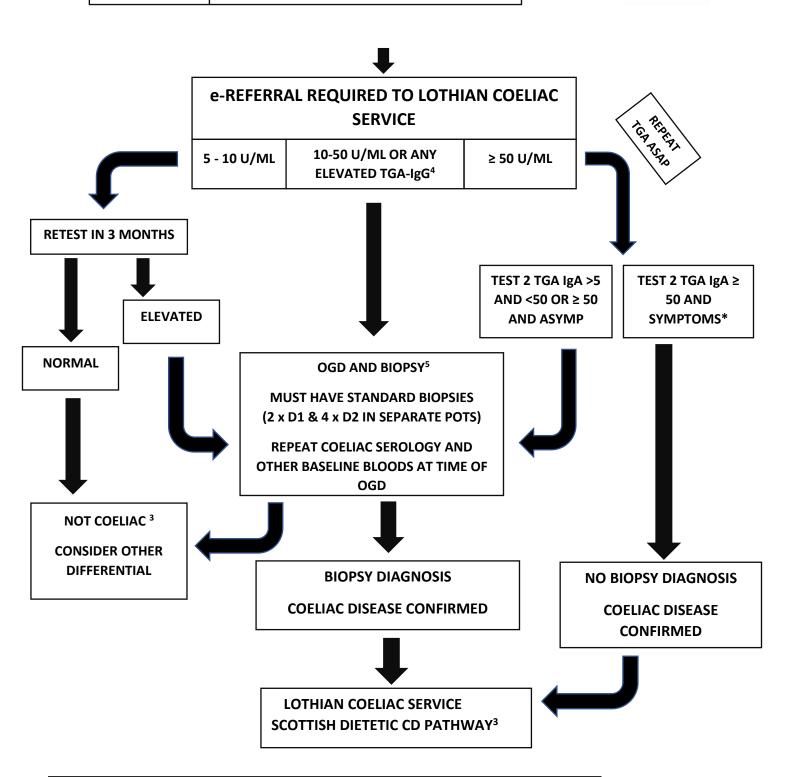
GP

or SECONDARY CARE

or POSITIVE TGA-IgG (sIgAD)





- * SYMPTOMS CONSIDERED CONSISTENT WITH CD DIAGNOSIS (NICE NG20)
- 1.IF NO SYMPTOMS CONSIDER REPEAT TGA-IgA IN 6 / 12
- 2. AT-RISK GROUPS (IE T1DM) NEED TO BE CAREFULLY CONSIDERED AS TO WATCH & WAIT AND REPEAT OR ENDOSCOPY AS FALSE +VE SEROLOGY MORE COMMON AND MAY SPONTANEOUSLY NORMALISE
- 3. POTENTIAL RED FLAG PATIENTS NEED TO BE CONSIDERED ADDITIONALLY FOR OTHER PATHWAYS EG OVER AGE >50 OR IF COELIAC AND PERSISTENT SYMPTOMS AT 3/12 CD SERVICE REVIEW
- 4. ALL SIGA DEFICIENT PATIENTS MUST HAVE ENDOSCOPY FOR SYMPTOM RESOLUTION
- 5. IS THE PATIENT FIT FOR ENDOSCOPY? IF NOT, WILL NEED TO BE CONSIDERED ON A CASE BY CASE BASIS