Diagnostics, Anaesthetics, Theatres and Critical Care Department of Laboratory Medicine

8th April 2026

Dear Colleagues,

Re: NHS Lothian Biochemistry Laboratories – Coeliac disease testing (tTG-IgA)

There is a supply issue affecting the current tTG-IgA test (DS2) used in coeliac screening that is anticipated to last until at least the end of April 2026.

Most negative results will not be affected and should be available in the next few weeks. However, intermediate and positive results may be delayed.

There will be an interim pathway using an alternative method (BioCLIA) while this situation lasts, which is as follows:

- **tTG-IgA <2.5 U/mL (BioCLIA)* -** Negative result – no further action required
- **tTG-IgA 2.5–20 U/mL (BioCLIA)*** – intermediate result – test will automatically be repeated by the lab using the current method (this may cause delays). Please refer to current RefHelp flowchart for follow-up
- **tTG-IgA 20 – 200 U/mL (BioCLIA)*** - Positive result – Please refer to GI for consideration of OGD and duodenal biopsy
- **tTG-IgA >200 U/mL (BioCLIA)* -** Positive result – Please repeat the test as soon as possible to confirm and complete an e-referral to the Lothian Coeliac Service. 2 serial results of this level is consistent with previous no-biopsy diagnosis of coeliac disease if presenting with coeliac compatible symptoms.

For results reported using the current method (DS2):

- **tTG-IgA ≤5 U/mL (DS2)** **-** Negative result – no further action required
- **tTG-IgA >5 U/mL (DS2)** **-** Follow the Refhelp pathway as previously: Coeliac – RefHelp

You may see two different method names on the coeliac screen reports; however the interpretative comments attached to the result will contain the appropriate advice for each result that the laboratory releases.

There will be no impact on the pathway followed for patients with IgA deficiency.

Please direct any queries to the following email address: becky.batchelor@nhs.scot

Kind regards,

Becky Batchelor

Principal Clinical Scientist, Western General Hospital

* the above thresholds for BioCLIA may be adjusted by the lab as further data on the performance of the BioCLIA assay becomes available.