

BONE METABOLIC DISORDERS AS THE FIRST MANIFESTATION OF AUTOIMMUNE ENTEROPATHIES

Gagik Hakobyan

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Poster

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A 23-year-old female with osteopenia and lumbar fractures was diagnosed with concurrent Crohn's disease and Celiac disease after presenting with gastrointestinal symptoms and undergoing comprehensive evaluation.

KEY POINTS

- Histological analysis confirmed dual diagnosis of Crohn's disease (Montreal classification A2, L3 + L4, B1p) and Celiac disease (Marsh classification III B) based on endoscopic findings of erosive lesions throughout the GI tract and elevated serological markers including Anti-tTG IgA at 406.1 RU/mL and fecal calprotectin >1000 µg/g.
- Treatment consisted of biological therapy with Infliximab, a gluten-free diet, bisphosphonates, and calcium and vitamin D supplementation to address both intestinal inflammation and bone health.
- The case illustrates that extraintestinal manifestations such as osteopenia and fractures may develop before or without classic GI symptoms in Crohn's and Celiac disease, potentially leading to initial evaluation for metabolic bone disorders while the underlying gastrointestinal condition remains undiagnosed.
- This case is relevant for clinicians evaluating young patients with bone health abnormalities who may have undiagnosed inflammatory bowel or malabsorptive conditions.

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