

CELIAC DISEASE IN ASSOCIATION WITH IMMUNE CHECKPOINT RECEPTOR INHIBITORS: AWARENESS IS NEEDED

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A literature review of 26 patients across 11 case reports identified celiac disease occurring during immune checkpoint inhibitor therapy, with 12 patients having serologic and histological diagnosis, raising questions about whether this represents new-onset disease or unmasking of pre-existing celiac disease.

KEY POINTS

- Twelve of 26 patients treated with immune checkpoint inhibitors developed serologic and histological celiac disease, a rarely observed immune-related adverse event
- Endoscopic findings differed between ICI-celiac disease and ICI-duodenitis, with duodenal congestion, nodularity, or erythema seen in 33% versus 67% of patients respectively
- Patients with ICI-celiac disease improved on gluten-free diet alone, while some required additional immunosuppression with variable symptom improvement
- ICI-celiac disease is morphologically similar to ICI-enteropathy but differs in treatment approach, as ICI-duodenitis may require systemic immunosuppression whereas ICI-celiac disease often responds to gluten-free diet alone
- The material suggests that celiac-specific antibody testing (tTG-IgA) and duodenal biopsy may help distinguish true celiac disease from ICI-induced villous atrophy in patients with digestive symptoms during checkpoint inhibitor therapy

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