

Mistakes in refractory coeliac disease and how to avoid them

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Mistakes In Articles

Small Intestine & Nutrition

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Refractory coeliac disease is defined by persistent malabsorption and villous atrophy despite strict adherence to a gluten-free diet for over 12 months.

KEY POINTS

- RCD diagnosis requires continuation or recurrence of symptoms and signs of malabsorption with villous atrophy in coeliac disease patients who have followed a strict gluten-free diet for more than 12 months
- Serology in RCD is typically negative, though a small percentage of cases show positive results at low titre
- Splenic hypofunction is a risk factor for RCD and can be detected by Howell-Jolly bodies and pitted red cells on peripheral blood smear or reduced spleen size on ultrasound
- This material is relevant for gastroenterologists managing coeliac disease patients with persistent symptoms despite dietary compliance

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