Coeliac guidelines for GP follow up

Annual height, weight, review symptoms and adherence to diet. We would suggest that all patients have an annual dietician review.

Annual blood tests should include: FBC, U and E, LFT, bone profile, B12 and folate, ferritin and coeliac antibodies. Baseline TFT, vitamin D and HBA1C (repeat if appropriate). Persistently high coeliac antibodies which show no or little change after 1 year, or persistent symptoms, should prompt a dietician review and consider referring back to gastroenterology for repeat biopsy if diet is not at fault. Serological tests should not be used alone to determine gluten exclusion.

Q fracture score should be calculated to determine the need for DEXA scan. This should not be done until the patient has been on a gluten free diet for 1 year as considerable improvement can occur.

http://www.qfracture.org/

Annual flu vaccine and vaccination against pneumococcus is also recommended.