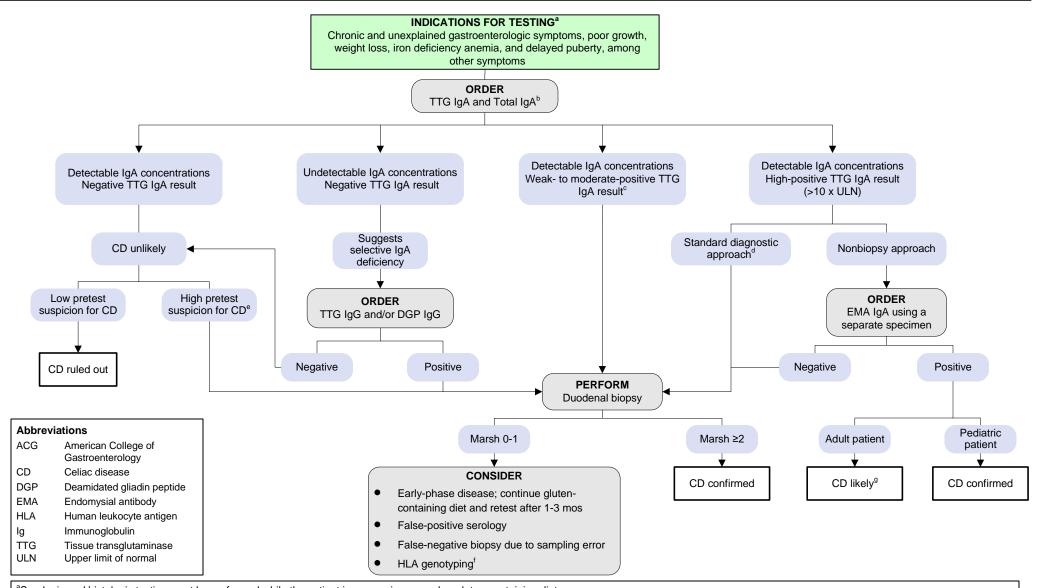
Symptomatic Celiac Disease Testing Algorithm

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^aSerologic and histologic testing must be performed while the patient is consuming a regular, gluten-containing diet.

References

- 1. Rubio-Tapia A, Hill ID, Semrad C, et al. American College of Gastroenterology guidelines update: diagnosis and management of celiac disease. Am J Gastroenterol. 2023;118(1):59-76.
- 2. Husby S, Koletzko S, Korponay-Szabó I, et al. European Society Paediatric Gastroenterology, Hepatology and Nutrition guidelines for diagnosing coeliac disease 2020. J Pediatr Gastroenterol Nutr. 2020;70(1):141-156.

^bTotal IgA testing is not required if selective IgA deficiency is known or has been previously ruled out. If selective IgA deficiency is present, test with TTG IgG or DGP IgG serologies.

cln individuals with weak- to moderate-positive TTG IgA results, additional DGP IgA and/or EMA IgA testing may be considered before biopsy to increase diagnostic confidence.

^dThe standard diagnostic approach, which includes a confirmatory biopsy, is recommended unless biopsy is refused or is not feasible.

eACG recommends biopsy following negative serologies if there was a high pretest suspicion for CD (eg, to rule out possible seronegative CD).

HLA genotyping may be useful to clarify discrepant serology and histology. A negative HLA result rules out CD. A positive HLA result is permissive of CD but cannot be used to confirm a diagnosis.

⁹Biopsy is required to confirm a diagnosis of CD in adults. A diagnosis of "likely CD" can be issued if biopsy is refused or is not feasible.