

Spectrum of Clinical Presentation Associated with Celiac Disease in a 55-Year-Old Woman

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Abstract

Introduction: Celiac disease is a chronic inflammatory autoimmune pathology of the intestine where its cornerstone is the immune reaction mediated to gluten. The disease has a prevalence of 1%-2% with an increasing trend in recent years. The inflammatory cascade that develops in the small intestine leads to progressive mucosal damage, villous atrophy and crypt hyperplasia in patients with genetic predisposition. It manifests with intrainestinal and extra-intestinal involvement, which often delays the diagnosis by exposing the patient to frequent and long-term complications. The basis of treatment is a gluten-free diet.

Methods: We describe a case with gastrointestinal and extraintestinal symptoms,

which resulted in celiac disease. The diagnosis was based on laboratory, serological, and histopathological examinations, as well as the response to a gluten-free diet.

Results: A 55-year-old woman, with watery/frequent diarrhea, abdominal pain and bloating, headache for 9 days, while she had years of gastrointestinal problems, significant weight loss (35 kg in the last 2-3 years), emotional disorders. Laboratory, serological, imaging and histopathological examinations established the diagnosis of Celiac. The Anti tissue transglutaminase antibodies IgA test resulted positive, 392.9 U/mL (<20). The patient appears more stabilized and the recommended gluten-free diet enabled weight gain (46.6 kg five weeks after

discharge, 50.7 kg eleven weeks, 55 kg ten months).

Conclusion: Celiac disease has numerous intra/extraintestinal manifestations, so clinicians must be vigilant in its timely identification. Proper dietary advice improves quality of life and avoids complications.

Keywords: Celiac disease, diarrhea, gluten-free diet, Transaminases, histopathological examinations