

Study links celiac disease, anorexia

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(HealthDay)—Young women with celiac disease may face a heightened risk of being diagnosed with anorexia, a new study suggests.



The Swedish researchers found the increased risk for these <u>women</u> was present both before and after their celiac diagnosis. Celiac disease is a digestive disorder where a person cannot tolerate gluten, a component of wheat, barley and rye.

The reasons for the link are not completely clear and the study, published online April 3 in the journal *Pediatrics*, did not prove that <u>celiac disease</u> causes <u>anorexia</u>. However, some U.S. doctors said they weren't surprised by the findings.

"I think a lot of us are aware there is a possibility of [celiac] patients developing an eating disorder," said Dr. Hilary Jericho, an assistant professor of pediatrics at the University of Chicago's School of Medicine. Jericho specializes in treating celiac disease.

She explained that because the disease requires careful attention to diet, some patients may end up taking those eating restrictions "too far."

For example, Jericho said, they might fear their symptoms will come roaring back if they eat the wrong food, and become overly rigid about their diet.

"It does happen," agreed Dr. Neville Golden, chief of adolescent medicine at Stanford University School of Medicine. "That's true not only with celiac disease, but with other diseases that require dietary restrictions, like type 1 diabetes."

Golden, who wrote an editorial published with the study, pointed to another likely explanation for the findings: Some women with celiac may initially be misdiagnosed with anorexia.

Celiac disease is an autoimmune disorder, and people with celiac disease must follow a <u>gluten-free diet</u>, to prevent the immune system from



attacking the small intestine.

While celiac is far different from an eating disorder, it has certain symptoms in common with anorexia. Both can cause weight loss, fatigue, abdominal bloating and—in children—poor growth and delayed puberty.

"Diagnosing anorexia is not always easy," Golden said.

That's why the diagnosis should involve not only a mental health professional, he said, but also a pediatrician or other doctor who can help rule out physical health conditions.

Past research has pointed to connections between celiac disease and anorexia, but those studies have been small.

So, the new study looked to Sweden's system of national registries. Researchers were able to analyze records from nearly 18,000 women who'd had celiac disease definitively diagnosed through a biopsy of the small intestine.

They then compared those women with over 89,000 others who'd never been diagnosed with celiac disease.

The vast majority of women with celiac disease had no diagnosis of anorexia, the study found. Still, their risk was higher than the norm.

Overall, women with celiac were twice as likely to be subsequently diagnosed with anorexia—even after factors like age and education levels were taken into account.

They also had higher odds of being diagnosed with anorexia before their celiac disease was recognized.



The link was strongest among women whose celiac disease was diagnosed before the age of 19: Their odds of having a previous anorexia diagnosis was 4.5 times higher than the comparison group of celiac-free women.

According to Golden, "that implies an initial misdiagnosis."

Jericho agreed that's a possibility. She made another point, though: The women in this study were diagnosed with celiac between 1969 and 2008. And years ago, there was little recognition of celiac <u>disease</u>.

"There's much more awareness of it now, and doctors are more likely to think of it," Jericho said.

Beyond that, she said, maintaining a gluten-free diet is more manageable now than years ago—with more options available at grocery stores and restaurants. That might lessen some of the stress and anxiety that can come with a celiac diagnosis, Jericho explained.

She said she and her colleagues are currently studying anxiety and depression levels, as well as "coping skills," among celiac patients.

For now, Jericho suggested that if celiac patients—or their parents—feel like their dietary restrictions have become unhealthy, they should talk to their doctor.

More information: Neville Golden, M.D., chief, adolescent medicine, and professor, pediatrics, Stanford University School of Medicine, Palo Alto, Calif.; Hilary Jericho, M.D., assistant professor, pediatrics, University of Chicago Medicine; April 3, 2017, *Pediatrics*, online

The U.S. National Institutes of Health has more on <u>celiac disease</u>.



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