

Bowel illnesses sometimes coincide in kids

21 April 2014, by Steven Reinberg, Healthday Reporter



Children with irritable bowel syndrome were more likely to also have celiac disease in Italian study.

(HealthDay)—Children suffering from irritable bowel syndrome are four times more likely than other kids to have a condition called celiac disease—an allergy to gluten—Italian researchers report.

More than 2 million people in the United States have celiac disease, or about one in every 133 people, according to the U.S. National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK).

Irritable bowel syndrome, another condition, causes cramping, abdominal pain, bloating, gas, diarrhea and constipation. Some symptoms may overlap with those of celiac disease.

"If you have a child with symptoms of irritable bowel syndrome, he or she has a four times higher risk of celiac disease as compared to the general population," said lead researcher Dr. Ruggiero Francavilla, with the interdisciplinary department of medicine, in the pediatric section of the Giovanni XXIII Hospital at the University of Bari.

In celiac disease, the body's immune system reacts to gluten, causing damage to the small intestine and making the body unable to absorb vitamins, minerals and other nutrients. This condition can lead to malnutrition, anemia or

osteoporosis, according to the NIDDK.

Gluten is found in wheat, rye and barley and grains derived from them, such as durum, semolina and spelt.

For the new study, Francavilla and colleagues looked at 782 children with stomach problems. Of these children, 270 had irritable bowel syndrome, 201 had chronic indigestion and 311 had stomach pain. All these children were tested for celiac disease.

In all, 15 children tested positive for celiac disease—12 with irritable bowel syndrome, two with chronic indigestion and one with stomach pain, the researchers found.

Given their findings, Francavilla thinks that only those children with irritable bowel syndrome need to be screened for celiac disease.

"Celiac screening should be addressed only in irritable bowel syndrome children rather than all the population with abdominal pain, since in those with abdominal pain not related to irritable bowel syndrome, the risk of having celiac disease is identical to the general pediatric population," he said.

Identifying irritable bowel syndrome as a high risk for celiac disease might make screening routine for children with the condition, while not screening all children with chronic stomach pain, Francavilla said.

While the study found a link between having inflammatory bowel syndrome and a higher risk for celiac disease in children, it did not prove a cause-and-effect relationship.

The report was published online April 21 in *JAMA Pediatrics*.

Dr. Mitchell Cohen, co-author of an accompanying journal editorial, said, "We can help diagnose and

treat children with celiac disease by screening children with irritable bowel syndrome. However, if the approach is not selective, many children will have false-positive test results that will cause more endoscopy and false worry."

Routine screening for celiac disease of any child with chronic stomach pain is not recommended. However, selective screening of children with irritable bowel syndrome is recommended, said Cohen, vice-chair of pediatrics for clinical affairs at Cincinnati Children's Hospital Medical Center.

Another expert takes a broader view of screening for celiac disease.

Dr. William Muinos, co-director of the division of gastroenterology at Miami Children's Hospital, said, "We always think of the possibility of celiac disease in children with chronic abdominal pain and some bowel dysfunction."

Muinios added that it's hard to tell the difference between irritable bowel syndrome and other causes of stomach pain. "It's a lot of medical history, and perception of the physician."

In his own practice, Muinos said, he screens most for celiac disease in children who have chronic pain and other symptoms, such as bowel bleeding or vomiting.

"Celiac disease can cause symptoms of irritable bowel syndrome," Muinos said. "Celiac disease is something you can treat once you find it," he said.

More information: *JAMA Pediatr.* Published online April 21, 2014. [DOI: 10.1001/jamapediatrics.2013.4984](https://doi.org/10.1001/jamapediatrics.2013.4984)
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