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# Analytical Chemistry 2018: A review of a relationship between coeliac disease and obesity: not just failure to thrive - Chelsea Spackman - Middlesex University

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The primary objective of this publication was to provide a systematic review of the literature on the relationship between CD and obesity. Further, the reviewer had the purpose of conducting an investigation on this correlation, ranging from paediatrics to adults, in specific areas such as the mechanism of the two conditions and the nutritional interventions. The mechanism review involved finding any pathogenic and pathophysiological link between the 2 conditions and investigating the possible association in clinical evidence and manifestations and of the symptoms. As a result, this research was designed to determine a paper which will effectively inform not only the general public but health care providers, concerning the importance of proper and time-sensitive diagnosis. In order to realize these objectives, the researcher conducted desk-based research, which involved a comprehensive review of various journal articles drawn from various publishers. The search strategy involved the utilization of both internal and external secondary sources of data . Moreover, the search strategy also considered the mechanistic pathology, functional physiology, and human intervention. The key findings indicated that CD and overweight/obesity present together, and that this should be taken into account both in diagnosis by medical professionals, and in the design of nutritional interventions as a GFD diet is associated with weight gain, and this is probably a result of poor GFD protocols that rely on replacement foods rather than a healthy, individualised diet. Conclusively, it was important to establish a link between obesity and CD based on the clinical implications of the findings, as well as the general health care field; where the present paper points out the proper diagnosis of both conditions, whether the symptoms are atypical or not. Hence, it had been important to supply a particular nutritional intervention for future patients, which can involve an introduction of a GFD before diagnosis, and strict follow-up The primary objective of this review was to provide a systematic review of the literature on the relationship between CD and obesity. Further, the reviewer had the purpose of conducting an investigation on this correlation, ranging from pediatrics to adults, in specific areas such as the mechanism of the two conditions and the nutritional interventions. The mechanism review involved finding any pathogenic and pathophysiological link between the 2 conditions and investigating the possible association in clinical evidence and manifestations and of the symptoms. As a result, this research was designed to determine a paper which will effectively inform not only the general public but health care providers, concerning the importance of proper and time-sensitive diagnosis. Methods: In order to achieve these objectives, the researcher conducted desk-based research, which involved a comprehensive review of numerous journal articles drawn from various publishers. The search strategy involved the utilization of both internal and external secondary sources of data obtained from Science Direct, PubMed, Journal of Paediatric Gastroenterology and Nutrition, The American Journal of Clinical Nutrition, and therefore the European Journal of Clinical Nutrition, among others. Moreover, the search strategy also considered the mechanistic pathology, functional physiology, and human intervention.The clinical presentation of celiac disease in children is very variable and differs with age. The prevalence of atypical presentations of disorder has increased over the past 2 decades. Several studies in adults and youngsters with disorder indicate that obesity/overweight at disease onset isn't unusual. In addition, there's a trend towards the event of overweight/obesity in celiac patients who strictly suits a diet . However, the pathogenesis and clinical implications of the coexistence of classic malabsorption (e.g., celiac disease) and overweight/obesity remain unclear. This review investigated the causes and main clinical factors related to overweight/obesity at the diagnosis of disorder and clarified whether gluten withdrawal affects the present trends of the nutritional status of celiac disease patients.Meanwhile, there are other reports of children with overweight/obesity at the time of CD diagnosis. The first published report describes a 5-year-old girl with obesity, short stature, and recurrent abdominal pain. The diagnosis of CD was suspected on the idea of case history , i.e., a sister with CD. A GFD attenuated the symptoms and improved height and weight Furthermore, in 2001, Franzese et alreported the case of a patient with steatohepatitis associated with obesity resistant to a low-calorie diet, during which CD was diagnosed on the idea of moderate persistent hypertransaminasemia. In 2006, Oso and Fraser diagnosed CD in an obese teenager who had recurrent episodes of diarrhea, especially after eating spaghetti. At diagnosis, blood tests revealed low iron, GFD feeding normalized iron level, and therefore the symptoms disappeared. However, the patient continued to realize weight (10 kg over 6 months) during follow-up. In 2009, Arslan et al. reported the case of a 7-year-old obese patient with CD (weight, >95th percentile; weight/height ratio, 167%) suspected of getting Hashimoto's thyroiditis and suffering from hypochromic anaemia unresponsive to iron therapy. Moreover, Balamtekin et al.] describe the case of a 17-year-old obese girl with weight >97th percentile and a BMI of 32.9 with epigastric pain and

vomiting. CD was diagnosed on the basis of the gastrointestinal symptoms, and the symptoms disappeared after a GFD was started. Nevertheless, her weight continued to increase.

**Biography**

Chelsea Spackman completed her MSc at Middlesex University in the UK. She has been published once, and continues working on new research and articles, whilst seeing clients and maintaining her own business in Toronto, Canada.

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