

My personal story of self diagnosed gluten intolerance is very similar to that of Jocelyn Anne Silvester - if you omit the barium investigations and substitute cholecystectomy (probably unnecessary). I had a positive family history of presentation in mid 40's, a negative endomysial antibody test and after several deliberate and inadvertent gluten challenges I decided not to proceed with a biopsy as I did not want to suffer needlessly for a test which would adhere to the guidelines, but would not alter my management. I too would have needed to take time off work if I had resumed a gluten diet. Fortunately, I had a specialist who supported me in this decision.

As a GP, I am identifying more cases than previously and more patients are presenting with self diagnosis. However I feel a hypocrite when I reiterate the current recommendation of remaining on a normal diet until biopsy - knowing that this often entails weeks of unnecessary suffering and that I did not follow this recommendation myself.

Is it not time for more consideration to be given to non-invasive methods of prompt diagnosis?