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BSG 2016 - Abstract Submission

Small bowel

BSG16-ABS-1120

DOES RESTRICTION OF GLUTEN-FREE PRESCRIPTION FOODS AFFECT PEOPLE WITH COELIAC DISEASE?

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Introduction: A gluten-free diet (GFD) is the mainstay of treatment for coeliac disease (CD). Since the late 1960s prescriptions for gluten-free foods have been widely available, helping CD patients maintain dietary adherence and reduce complications. In Scotland and Wales GF foods are widely prescribed in accordance with the National Prescribing Guidelines. In England however, whilst the vast majority of Clinical Commissioning Groups (CCGs) are following this guidance some have chosen not to. This has led to the reduction or removal of prescriptions in certain parts of England. This cohort study examines the influence restriction or removal of GF prescriptions may have on CD patients.

Methods: Between September and October 2015, CD patients and carers of CD patients were approached from 4 differing CCG areas (North Norfolk, West Suffolk, Oxfordshire, Vale of York). These CCG areas were specifically selected as areas where CCGs had either restricted or removed GF prescriptions. All participants were asked to complete an online questionnaire, with information requested pertaining to prescriptions, availability of GF foods, costs incurred and what influence changes to prescriptions have had on health. Findings from this work were then compared to a previous study assessing primary care trusts, undertaken in 2013 (n=1000).¹ Statistical analyses were performed using SPSS version 20.0, with X² statistics used to compare categorical data.

Results: 25.0% (894/3586) of invited individuals completed the online questionnaire (632F: 262M, mean age of 59.2 years). Compared to the 2013 cohort, there was a significant reduction in the number of patients receiving gluten-free prescriptions (63% versus 70%, p<0.001). Nearly 60% (514/894) of respondents felt less supported in the management of their CD due to changes in their prescription, with only 37.2% (333/894) currently meeting national guideline standards by having an annual follow-up appointment. Although only 6.7% (n=60) felt that the prescription changes had directly affected their health, costs incurred to them had increased (median weekly cost = £8.62). Although not statistically significant, the greatest detriment to health was noted in those having complete removal of their GF prescriptions (North Norfolk 9.1%).

Conclusion: Although this study is confined to only 2% (4/209) of all CCGs in England, it raises concerns as to how the restriction and removal of gluten-free prescriptions can affect patients with CD. Given these findings, further work should now aim to establish whether prescription restriction is a false economy, as detriment may ensue due to poor dietary adherence and the development of serious long-term complications.

References: ¹The impact of the restrictions to gluten-free prescription foods on people with Coeliac Disease. BSNA. 2013

Disclosure of Interest: None Declared