In a secondary care-based study from the Netherlands, 148 patients with IBS were screened for CD by measuring IgA antiendomysial antibodies; total IgA was also measured, and none of the subjects had IgA deficiency. The prevalence of celiac disease in patients presenting with symptoms of IBS was low with none of the IBS subjects found to have elevated endomysial antibodies. Furthermore, 32 of these subjects underwent upper endoscopy with small bowel biopsies, and none had convincing histologic findings for CD. The experience at our large Midwest tertiary medical center also indicates no difference in the prevalence of CD in patients with and without IBS. In yet unpublished data from an ongoing family case-control study of outpatients with and without IBS, of 566 case- and 555 control-probands, 7 cases and 5 controls had a positive or weakly positive TTg test, and 1% of cases and 0.5% of controls were confirmed to have CD by endomysial antibody testing. Therefore, the prevalence of CD in IBS in any type of care setting is uncertain as there appears to be conflicting reports as to whether CD occurs more frequently in IBS (Figure 22-2).

So who do we believe? Do we simply pick a side and say that either celiac disease is common or not common in patients with IBS? Is it even possible to answer this question given that the literature is full of case series or case-control studies that give conflicting results?

A recent well-performed review and meta-analysis on this question by Ford and colleagues has helped to bring some clarity to this question. This analysis involved 14 studies that included 4204 subjects, of whom 2278 (54%) met diagnostic criteria for IBS based on the Manning criteria; Rome I, II, or III; or the Kruis scoring system. It was reported that the pooled prevalence of positive IgA-class antigliadin antibodies, either positive endomysial or TTg antibodies, and biopsy-proved celiac disease was 4.0% (95% CI 1.7 to 7.2), 1.63% (95% CI 0.7 to 3.0), and 4.1% (95% CI 1.9 to 7.0), respectively, with pooled odds ratios of 3.40 (95% CI 1.62-7.13), 2.94 (95% CI 1.36 to 6.35), and 4.34 (95% CI 1.78 to 10.6), respectively. This led to the conclusion that the prevalence of biopsy-proved celiac disease in patients with IBS was approximately 4% and was more than fourfold higher than that of controls without symptoms of IBS.

Figure 22-2. Prevalence of celiac disease in irritable bowel syndrome by care setting.