

Celiac disease linked to lymphoproliferative disorders

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(HealthDay) -- Patients with celiac disease, particularly those presenting with malabsorption symptoms later in life, have a higher incidence of lymphoproliferative disorders (LPDs), according to research published in the August issue of the *American Journal of Hematology*.

Lori A. Leslie, M.D., of the Columbia University Medical Center in New York City, and colleagues conducted a [retrospective cohort study](#) involving 1,285 adults with biopsy-proven celiac disease seen at a U.S. referral center from 1981 to 2010 to determine the incidence of LPD subtypes and survival according to LPD subtype.

The researchers identified 40 patients who developed LPD (standardized incidence ratio [SIR], 6.48), including 33 with non-Hodgkin's lymphoma

(NHL; SIR, 6.91). Significantly elevated associations were seen for the incidences of enteropathy-associated T-cell (EATL), non-EATL T-cell, diffuse large B-cell, mantle cell, and marginal zone lymphoma subtypes of NHL when only those diagnosed with celiac before LPD were considered. Patients with EATL had a shorter average survival compared with non-EATL patients. Patients who developed LPD were more likely to present with diarrhea, [abdominal pain](#), and/or weight loss and were older at the time of celiac diagnosis (57.9 versus 42.5 years).

"In the future, the association between celiac disease and various LPD subtypes could be further analyzed to identify common molecules in the inflammatory and lymphoproliferative pathways as promising targets for drug design," the authors write. "These findings could then be studied to risk stratify patients with regard to lymphoma, devise surveillance protocols, and propose preventative strategies in celiac disease [patients](#) with increased risk of developing LPD."

More information: [Abstract](#)
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