Disease burden and quality of life in patients with celiac disease on a gluten-free diet: an analysis of the iCureCeliac® registry

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Background
• Celiac disease (CeD) is an immune-mediated disorder, CeD symptoms and health complications are triggered by gluten exposure.
• To identify patient subgroups with distinct CeD symptom burden profiles and health impacts in patients with CeD on a gluten-free diet: an analysis of the iCureCeliac® registry.

Methods
• LCA is a model-based clustering method that uses latent variables to identify distinct subgroups or clusters of patients.
• The iCureCeliac® registry is a global, longitudinal observational database for patients with CeD and treated in CeD referral centers and community practices. Data collected during the period December 2015 to October 2019 are analyzed here.

Study design
• The iCureCeliac® registry is a longitudinal observational database for patients with CeD and treated in CeD referral centers and community practices. Data collected during the period December 2015 to October 2019 are analyzed here.

Results
• Of the 6,840 patients in the iCureCeliac® registry, 3,661 patients reported complete PROMIS-GI domain and Celiac Symptom Index (CSI) questionnaires. In total, 376 patients had complete data for both scales and were included in analysis.

• The LCA identified two distinct subgroups:
  - Lower CeD symptom burden: patients with lower symptom burden (CSI score ≤30)
  - Higher CeD symptom burden: patients with higher symptom burden (CSI score >30)

• Variables of interest (e.g. demographics, clinical characteristics, QoL as measured by the RAND 36-item Short-Form Health Survey [SF-36]7 and the Celiac Disease Quality Of Life Survey [CD-QOL],6 health complications) were compared between LCA-defined subgroups. Higher CeD symptom burden subgroups had a higher prevalence of CeD-related health conditions (p < 0.05) and a higher prevalence of CeD symptom burden subgroups (p < 0.05), most patients were female (82.4%), had a mean age of 51.1 (6.9) years, and had a mean disease duration of 5.1 (6.9) years.

• Compared with patients with a lower symptom burden, patients with a higher symptom burden had a higher mean number of days per year absent from school or work (p < 0.001), higher prevalence of CeD-related health conditions (p < 0.001), and a higher prevalence of CeD symptom burden subgroups (p < 0.05).

Conclusions
• This study indicates that most patients (94%) report always maintaining a strict GFD, despite having CeD-related health conditions and symptom burden subgroups.

References

For more information, please visit the Takeda website at www.takeda.com.

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