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British Columbia

Celiac News

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**Canadian Celiac Association
L'Association canadienne de la maladie coeliaque**



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NEXT ISSUE:

If you have any recipes, restaurant reviews/articles for the September 2020 issue, please have them submitted by August 15, 2020.

If you have any comments, praises or criticisms, quips or questions:

Please submit to:

- info@bcceliac.ca
- 604-736-2229 / 877-736-2240
- CCA British Columbia
Letters to the Editor
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CCA Vision Statement:
The gluten solution: Find. Treat. Cure.

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NEWSLETTER SUBMISSION DEADLINES

Newsletters will be distributed:

March 1st - Easter & Spring
June 1st - Travel & Summer

September 1st - Fall & Back to School
December 1st - Christmas & Holidays

Also, please submit your content to us a minimum of 3 weeks prior to the edition you'd like to be featured in. We will accept early submissions for upcoming editions as well, just let us know which issue you'd like to be in. You can submit your stories, recipes, photos, etc in a variety of ways. If you have any questions: EMAIL: val_vaartnou@telus.net or info@bcceliac.ca

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President's Message



The ups and downs experienced so far in 2020 are incredible to reflect on. Life seemed relatively normal at the start of the year in North America, with only distant murmurs of the coronavirus abroad. The ripple effects seemed to come in slowly and then all at once, the serious consequences of the virus's spread became a reality.

If you can believe it, we at the CCA British Columbia were able to host our annual general meeting in Burnaby as normal on March 1st (COVID-19 was not declared a pandemic by the WHO until March 11th). 20 members were in attendance, and we had great participation from our audience. Thank you to those who provided tasty treats for us to share, including Bard's Beer for their generous gifts for all in attendance.

We understand that the pandemic is creating a great deal of stress on the general public, and individuals with celiac disease in particular are presented with unique challenges. For one, grocery stores have struggled to maintain their inventory in the wake of panic buying. It is highly suspected that when regular food items run out, shoppers are turning to the gluten-free alternatives instead, even if no one in their household is required to eat gluten-free. Secondly, there are many Canadians now relying on food banks, as more and more jobs are lost from business closures. As the system becomes overtaxed, it can become increasingly

difficult for a celiac to find safe options in these food banks.

Our Chapter is actively working to support the celiac community during this time. In collaboration with our National organization, we are reaching out to our local food banks to find ways that we can make gluten-free food easily available to those that need it. In March, we also created a resource page on our website to help the public find restaurant establishments serving gluten-free meals for takeout and delivery: bcceliac.ca/covid-19.

The pandemic did have one unexpected benefit. The CCA hosts a conference each year to bring professionals from the food and medical industries together to discuss advances in celiac disease research and development. Because the conference could not be held in person this year (it was scheduled to be in Regina in June), it was brought online and streamed live on May 2nd. The great part about this is that the information was delivered to a wider audience than ever before! You can still watch the entire conference online here:

facebook.com/CCAceliac/videos/809277626229780.

We also had to take a different approach with Celiac Disease Awareness Month in May. No in-person events meant we tried our hardest to connect with our community through social media. Celiac Disease Awareness Day was given an official proclamation by the cities of Vancouver, Richmond, Surrey, Port Moody and the Province of British Columbia. Additionally, Vancouver City Hall, BC Place, and Science World lit up green to show their support.

Finally, we want to let everyone know that we are still participating in the Scotiabank Vancouver Half Marathon and 5K this June as a virtual event. The Scotia Run has always been an important fundraising and awareness-raising opportunity for our Chapter, and we think this is a unique opportunity to have individuals outside of the Lower Mainland join our team for the first time. We welcome you to snap photos of you and your family walking, running, or taking part in any other means of exercise and then share your photos with us so we can stay connected! We will have prizes for our top fundraisers too! Stay tuned for more details. The run can be run at your convenience anytime between June 29th and September 18th.

To sum everything up, it's been a busy few months here at the CCA BC and we will continue working hard to ensure our community is supported in these trying times. As the summer months are approaching, we hope you and your families are able to enjoy the sunshine while continuing to stay safe.

Jessica

Celiac Disease and COVID 19

Submitted by Jessica Mejia, President, CCA BC

COVID-19 is the most recently discovered infectious disease of the coronavirus family of viruses. The outbreak began in Wuhan, China in December 2019, and spread to a worldwide pandemic by March 2020. Typical symptoms include fever, dry cough, and tiredness. 80% of individuals may recover from the virus without hospital treatment, with 1 out of every 5 people becoming seriously ill¹. Individuals with celiac disease may be wondering if the virus could affect them differently compared to an otherwise healthy person without celiac disease.

From the CCA's Professional Advisory Council, whose members include physicians, gastroenterologists, and registered dietitians: "Patients with only celiac are not immunocompromised, unless they are taking medications for other medical conditions which are immunosuppressive. Like everyone, they should exercise careful infection control practices, including washing hands with soap and water frequently, and avoid touching the eyes, nose and mouth. Patients with other comorbidities such as diabetes may be at higher risk of severe infection and should take additional precautions."².

Patients with celiac disease show a slight but measurable increased risk for viral infections, according to Benjamin Lebwohl, MD, Director of Clinical Research for the Celiac Disease Center at Columbia University, New York. This is based on studies of other infections like herpes zoster (an influenza), but there is currently no direct evidence of severe consequences related to COVID-19 and celiac disease. Lebwohl states, "my hope and expectation is that any increased risk of COVID-19 related complications in people with celiac disease, if present, will be very small. Certainly, there's no evidence to support additional precautions beyond what is advised to the general population at this time."³.

The Celiac Disease Center is currently undertaking an international effort to quantify the effects of COVID-19 on patients with celiac disease.⁴ Celiac patients with confirmed cases of COVID-19, regardless of severity, are encouraged to ask their healthcare provider to report their case at covidceliac.org. Please keep in mind they are asking for clinicians to report these cases rather than the patients themselves. This review should assist researchers in answering questions related to COVID-19 and celiac disease that are currently left only to educated speculation.

It has been reported that panic buying has reduced the availability of gluten-free essentials in grocery stores. In response, a section was added to the Canadian Celiac Association website containing a list of partners who are delivering gluten-free products direct to consumers in Canada: celiac.ca/news-events/covid19. The CCA has also reached out to major grocery retailers across Canada for updates.

Tip! It is important that individuals speak with their local store or department managers to request items that are out of stock or that you would like to see in store.

WHEN TO USE A MASK

For healthy people wear a mask only if you are taking care of a person with suspected 2019-nCoV infection

Wear a mask, if you are coughing or sneezing

Masks are effective only when used in combination with frequent hand-cleaning with alcohol-based hand rub or soap and water

If you wear a mask then you must know how to use it and dispose of it properly



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As of April 2, 2020:

"As far as PCGF products and their in-stock position, we are currently not hearing about any major issues with our products. The bakery items are not seeing any supply chain issues at this time. For the dry grocery and frozen items, we may possibly see a risk of intermittent supply as the vendors are catching up to the high demand that has been created by pantry and freezer loading. Our supplier base is working exhaustively to keep product in stock." – **Loblaw Companies**

"...we do not have anything to report about shortages or delays with these products. We're receiving regular shipments of supplies to our stores, and our teams are working around the clock to keep our shelves filled. However, each store place their orders based on local customer demand, so product availability do vary across regions and even stores. Since we do not have store stock information here at Customer Care, we invite you to speak directly with your local Store Manager to express your interest in seeing the store stock these product and the possibility of the store ordering it in for you." – **Sobeys**

As the pandemic has resulted in widespread job loss across the country, food banks are another area targeted by the CCA for additional support.

From Pamela Aung-Thin, Associate Assistant Deputy Minister, Health Products and Food Branch:

"Stakeholders noted some reports of limited availability of food products for special dietary needs (e.g., celiac disease) and safe foods for those with allergies. Individuals reliant on services such as meals on wheels or food banks may be at an increased risk."

Celiac Disease and COVID 19

Continued....

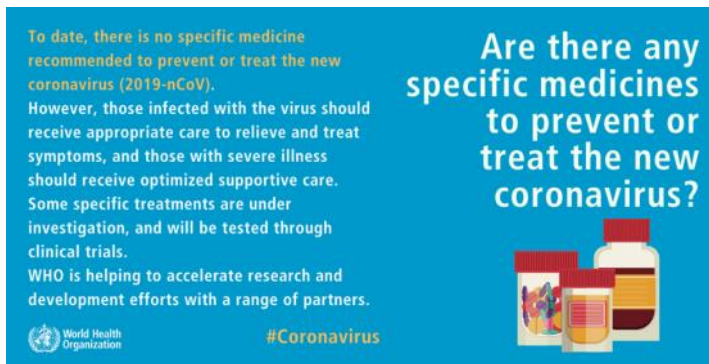
The Government is providing special funding for food banks and local food organizations. Furthermore, we have introduced an interim order to facilitate access to foods for a special dietary purpose, which include gluten-free foods. Health Canada will explore including information on food allergies on the COVID-19 website and in the Canada's Food Guide newsletter, which is currently focused on COVID-19 related food issues."

Resources for food banks are consolidated on the CCA's website here: celiac.ca/food-industry-professionals/food-banks.

Not surprisingly, the COVID-19 pandemic is causing additional stress on families, many of whom have had their lifestyles drastically changed due to social distancing restrictions implemented to stop the spread of the virus.

Here are some general tips for reducing stress⁷:

1. Get enough sleep to see improvements in overall mood, energy, and physical health.
2. Stay connected with friends and family by phone or social media.
3. Develop your time-management skills to effectively balance work and family demands.
4. Actively problem-solve with those you live with to reduce stressful situations as they arise.
5. Take time for yourself for the things you enjoy, whether it be reading, meditating, listening to music, and other self-care activities.
6. If you are feeling overwhelmed, search online for doctors and counsellors that deliver professional services virtually.
7. Maintain a healthy lifestyle through good diet and exercise.
8. Limit the amount of time you spend watching or listening to the news if you find it upsetting.



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List of Links:

1. <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/q-a-coronaviruses>
2. <https://www.celiac.ca/news-events/covid19/>
3. <https://www.beyondceliac.org/coronavirus/>
4. <https://celiac.org/about-the-foundation/featured-news/2020/03/now-open-registry-for-people-with-celiac-disease-who-are-diagnosed-with-covid-19/>
5. <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/when-and-how-to-use-masks>
6. <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters>
7. Adapted from the World Health Organization infographic https://www.who.int/docs/default-source/coronaviruse/coping-with-stress.pdf?sfvrsn=9845bc3a_2 and Harvard Health infographic <https://mcusercontent.com/43bc52c036e0bdceb52a0d238/images/a28e8ed3-fd28-4eb4-b010-347f6fae70e9.jpg>

Peer Support

Submitted by Gauri Bawa. Registered Dietitian, CCA National Client Support, Thursday 9am-5pm EST

Peer support is the most distinguished form of support that an individual can provide to another human being new to similar circumstances. It is a support that assists someone to learn faster, smoother and with less confusion involved and to understand the significance of following the new lifestyle that must be adopted. Research indicates that providing peer support improves coping, self-efficacy and social support, among other things.

Peer supporters offer support and encouragement to assist in navigating the path to recovery by using their own lived experiences and sharing information that can help in moving forward. It is a relationship that can help in improving the quality of life.

So, if you feel this is your calling then come be a peer supporter with CCA.

Email clientsupport@celiac.ca



Celiac Disease in the News

Submitted by Val Vaartnou

The following are summaries of research in progress or completed from credible medical journals and medical sites. Links are provided where further information can be found.

Celiac Disease Patients have a Slightly Higher Mortality Risk

Over a ten-year period, 9.7 people out of 100 people with celiac disease died from all causes compared to 8.6 out of 100 people who did not have celiac disease, according to the study. The study was based on 50K Swedish celiacs between 1969 and 2017. However, no increase in mortality risk was seen when the 25 percent of celiac disease patients who had persistent damage to the villi were compared to those who had intestinal healing. Dr. Lebowhl emphasized that the absolute risk, which was about 1 more person in 100 over 10 years is more practical. "We know that the great majority of people with celiac disease live long and healthy lives," he said.

Among the causes of death, patients with celiac disease were at slightly increased risk of cardiovascular disease death, cancer, and respiratory disease.

For more information: <https://jamanetwork.com/journals/jama/article-abstract/2764182>

IL 15, gluten and HLA-DQ8 drive tissue destruction in celiac disease

Using a mouse model, this study found that overexpression of IL-15 in both the epithelium and the lamina propria (thin layer of connective tissue, which lies beneath the epithelium. Together they make up the mucosa) is required for the development of villous atrophy in the small intestine. This demonstrates the location-dependent central role of IL-15 in the development of celiac disease. In addition, CD4⁺ T cells and HLA-DQ8 have a crucial role in the causing cytotoxic (toxic to living cells) T cells to mediate intestinal epithelial cell disintegration. They also demonstrated a role for the cytokine interferon- γ (IFN γ) and the enzyme transglutaminase 2 (TG2) in tissue destruction.

For more information: <https://www.nature.com/articles/s41586-020-2003-8>. February 12, 2020

Masked bolus gluten challenge low in FODMAPs implicates nausea and vomiting as key symptoms associated with immune activation in treated coeliac disease

After ingestion of gluten, nausea increased most in those with treated CD. Apart from tiredness and headache, changes in other symptoms were small or absent. Only nausea increased significantly in occurrence with gluten (11% vs 69%, $P < .001$). Without nausea, only tiredness and flatulence were common after gluten and vomiting were the only adverse events more common with gluten than the control group.

For more information: 26 November 2019
<https://doi.org/10.1111/apt.15551>

Researchers confirm celiac disease can damage the brain

People living with celiac disease (CD) have a higher risk of neurological damage according to a new study from the

University of Sheffield. Dr. Iain Croall, a research fellow from the University of Sheffield's Department of Infection, Immunity and Cardiovascular Disease, said and Associate Member of Insigneo: "For the first time, the study offers some clarity on the fact that there does appear to be the risk of neurological damage for people living with CD, driven by their autoimmune response to gluten exposure.

"Our independent UK Biobank participants with CD showed meaningful neurological and psychological deficits when compared with control participants.

"The data from the CD group of participants showed a significant reaction time deficit, compared to the control participants; alongside signs of anxiety, health-related unhappiness and depression." Note: Dr. Croall was Guest Speaker at the recent CCA National On-line conference.

For more information: https://medicalxpress.com/news/2020-02-celiac-disease-brain_amp and I.D. Croall et al. Cognitive Deficit and White Matter Changes in Persons with Celiac Disease: a Population-Based Study, *Gastroenterology* (2020). DOI: [10.1053/j.gastro.2020.02.028](https://doi.org/10.1053/j.gastro.2020.02.028)

Cytokine release and gastrointestinal symptoms after gluten challenge in celiac disease

Rapid, coordinated elevation of circulating cytokines including IL-2 confirmed in vivo activation of CD4⁺ T cells in CD patients after injecting short antigenic gluten peptides or ingestion of gluten that was closely associated with the onset and severity of acute digestive symptoms. The systemic cytokine release observed provides definitive evidence of rapid immune activation within 2 hours after administering gluten peptides in almost all HLA-DQ2.5⁺ CD patients. Qualitative and quantitative assessments of cytokines elevated after injecting gluten peptides or gluten food challenge were complicated by individual cytokines having different profiles and by low baseline concentrations of key cytokines such as IL-2.

For more information: <https://advances.sciencemag.org/content/5/8/eaaw7756>

Cardiovascular outcomes in patients with Celiac Disease: an insight from the national inpatient sample

According to the results, in 2014 the proportion of patients with CD in AMI hospitalizations grew from 0.015% in 2005 to 0.076%. The results showed that CD+AMI patients were significantly older (70.3 vs. 67.4 years), and more likely female (51.9% vs. 39.5%). "We found that the number of acute myocardial infarction related admissions in the CD patients has risen more than five-fold from 2005-2014," the authors concluded. "However, the odd of in-hospital mortality in these patients is lower than the patients without CD for unclear reasons or mechanisms. The results of our study show that though the CD-related systemic inflammation is associated with an increasing number of AMI hospitalizations, these patients have comparatively favorable outcomes than controls; though it definitely adds an extra cost to the hospitalization."

For more information: <https://www.docwirenews.com/conference-coverage/acc20/cardiovascular-celiac-disease/>

Celiac Disease in the News

Researchers investigate rogue cells that are the root cause of autoimmune diseases

"Current treatments for autoimmune disease address only the symptoms, but not the cause. To make more targeted treatments that address disease development and progression, we first need to understand the cause," says Professor Chris Goodnow, co-senior author of the published work, Executive Director of the Garvan Institute and Director of the UNSW Sydney Cellular Genomics Futures Institute.

By first separating individual cells, and then separating their genetic material, the researchers isolated immune cells that produced 'rheumatoid factors' - antibody proteins that target healthy tissues in the body and are associated with the most common autoimmune diseases, including rheumatoid arthritis. "We uncovered 'lymphoma driver mutations', including a variant of the CARD11 gene, which allowed the rogue immune cells to evade immune tolerance checkpoints and multiply unchecked," explains Professor Goodnow, who first hypothesised that disease-causing autoimmune cells employ this cancer tactic in 2007. The researchers are now planning follow-up studies to investigate mutations of autoimmune cells in a range of other diseases, including lupus, celiac disease and type 1 diabetes.

For more information: <https://medicalxpress.com/news/2020-02-rogue-cells-root-autoimmune-disease.html>

Gynecological symptoms in patients with non-celiac wheat sensitivity (NCWS)

The researchers in Palermo, Italy surveyed gynecological symptoms and recurrent cystitis in sixty-eight women with NCWS. Nearly sixty percent of NCWS patients had more frequent gynecological symptoms, than did healthy control subjects, IBS control subjects or controls with celiac disease. More than twenty-five percent of patients with NCWS experienced more frequent changes to the menstrual cycle, compared with just over eleven percent of healthy controls. Sixteen percent patients with NCWS suffered from recurrent vaginitis (16%) and dyspareunia (6%) significantly more frequently than healthy controls.

Over a one-year follow-up period, nearly half of patients with menstrual disorders and nearly forty percent with recurrent vaginitis reported that their symptoms had resolved on a wheat-free diet.

For more information: <https://link.springer.com/article/10.1007/s10620-020-06184-8>

Children who meet specific criteria do not require an endoscopy for diagnosis of Celiac Disease

The team analyzed 2016 medical records for celiac patients under 19 years old, who were diagnosed in five European countries. 653 children from Croatia, Hungary, Germany, Italy, and Slovenia data was analyzed. Ages of subjects were 7 months-18.5 years, average age of 7 years. 64% were female.

134 children were asymptomatic at diagnosis. Of 519 children who did show symptoms, 107, nearly 21%, were diagnosed without biopsy. Out of 412 children diagnosed via biopsy, 214, or nearly 52% had tTG levels of above 10 times upper level of

normal (ULN) and thus could have been diagnosed without biopsy. The data showed no differences in diagnostic times with the no-biopsy approach. In this study, about 60% of celiac patients who show symptoms could have been diagnosed without duodenal biopsies. However, only 20% of eligible patients are getting a biopsy-free celiac diagnosis.

For more information: <https://www.celiac.com/>

Ocular Manifestations in Celiac Disease: An Overview

Several ocular symptoms and disorders have been associated with CD and are a result of defective intestinal absorption and immunological mechanisms. These include nyctalopia, dry eye, cataract, thyroid-associated orbitopathy, uveitis, central retinal vein occlusion and neuro-ophthalmic manifestations. In addition, CD-related ocular disease may represent the first manifestation of CD.

For more information: <https://link.springer.com/article/10.1007/s10792-019-01254-x>

Increased Prevalence of Celiac Disease in School-age Children in Italy

The incidence of celiac disease in school age children in Italy has increased to 1.5% which is significantly higher than 25 years ago. Causes for this increase need to be determined.

For more information: [https://www.cghjournal.org/article/S1542-3565\(19\)30651-2/pdf](https://www.cghjournal.org/article/S1542-3565(19)30651-2/pdf)

Celiac Disease and Its Role in the Development of Metabolic Bone Disease

CD and the effects of malabsorption on bone health. Imbalances in bone resorption and formation particularly in individuals with CD and persistent disease activity ultimately lead to a state of bone loss and impaired mineralization. Initiation of a gluten-free diet is critical in the management of CD-related metabolic bone disease, demonstrating improvements in bone mineral density within the first year of dietary adherence.

For more information: <https://pubmed.ncbi.nlm.nih.gov/31320223>





mandarin Spice Cake

1 pkg. Namaste Foods Spice Cake Mix

3 eggs

2/3 cup oil

Two - 11 oz. cans mandarin oranges in juice or water

Preheat oven to 350° F. Lightly spray 9" x 13" pan with non-stick spray.

Pour juice from oranges into a 3/4 cup measuring cup. (If the oranges are packed in water or simply if you prefer, use orange juice instead.) Combine cake mix, eggs, oil and juice in large mixing bowl. Beat with electric mixer or by hand until blended well. Fold in mandarin orange slices.

Pour batter into prepared pan and bake for approximately 45 minutes, or until toothpick inserted into center comes out clean.

For Fun: Top with cream cheese frosting and candied orange slices for a special occasion!

enjoy!

Ask Jess: Nutrition Corner



Jess Pirnak is a Registered Dietitian and kindly volunteers her time to answer your questions at: nutrition@bcceliac.ca.

She is a member of the Registered Dietitians of Canada and you can read her blog at: <https://www.foodyourself.com/>.

She is also available for private consultation. She can be contacted at:

<https://www.foodyourself.com/contact-1/> .

Jess has also created a series for the newly diagnosed on YouTube. For the links to these videos, please visit www.bcceliac.ca or search Jessica Pirnak YouTube for a listing of her videos.

Q) With the Scotiabank Charity Challenge just around the corner I've decided to start moving my body every day in preparation for the virtual run. Do you have any advice for optimizing my exercise through nutrition?

A) There is no better way to celebrate spring than getting outside and moving your body. I love hiking, both for the mental and physical boost. Whether you're hitting the trails or hopping on your bike for a long ride, you might want to consider packing snacks.

However, despite all the advice on optimizing exercise through nutrition, the average person (that includes me!) doesn't really need to eat during a workout. For those of us doing typical light or moderate workouts that last less than an hour, all you need is some water to stay hydrated. Hitting a class or going for a 30-minute jog? Water is just fine. As the weather heats up, you might want a bit of electrolyte mix if you sweat a lot.

However, if you are going out for longer than an hour, you don't want hunger hampering your fun! For moderate activity over an hour, like hiking or biking, eat whatever you love. Trail mix, GF whole food nutrition bars and fruit are great options that aren't too difficult to pack.

Beware! These Are Not Gluten Free

Submitted by Val Vaartnou, Past President, CCA BC

- Freekah – I actually saw this on a recent label. Freekah is unripe wheat kernels that have been toasted.
- Organic wheat – just because it is organic does not make it OK. It is still wheat that has been grown without the use of synthetic chemicals.
- Orzo – it is pasta made from semolina wheat flour despite the fact it actually looks like rice. It is commonly mixed into rice pilaf dishes in restaurants, so beware!
- Couscous – despite looking like rice again, it is made from durum wheat flour.
- Einkorn – is a relative of Kamut and is an ancient form of wheat. It still contains gluten.
- Farro – is another ancient form of wheat and yes it contains gluten.
- Seitan – often called “mock duck” or “mock meat” beware as it is pure wheat gluten. (I have not seen it on a label).



Board Highlights - CCA British Columbia – February 2020 - May 2020

- Restaurant events: Harold's, Richmond and Rangoli, Vancouver
- Storage moved. Thanks to Canadian Mattress Recycling!
- Osteoporosis Canada presentation postponed due to COVID 19
- Scotiabank Run June 28th changed to virtual event and dates changes to June 29th to September 18th. Donations can be received to mid October.
- Support groups in person meeting cancelled due to COVID 19. On-line help, phone help and Facebook support continues.
- AGM March 1 had good turn-out. New bylaws and Special Resolution were unanimously passed. New Board of Directors voted in by acclamation. Welcome to new Board members: Julie Clement, Lia Fairbairn and Arica Sharma.
- Liz, Val, Julie, and Jess Pirnak will work with Dr. Jenny Suneby Jagers, PhD, Critical Care Medicine to put together slides on celiac disease for medical staff at hospitals doing rounds. Certifying the information for Educational Credits will be a priority. Rack card information for physicians' offices will need to be customized for medical specialties. (Family practice, gastroenterology etc.)
- Web page set up for COVID 19 support resources as well as listing gluten-free companies who are delivering and providing services. Shortages of gluten-free products on store shelves have been noticed.
- Health Canada has mandated that Food Banks and other public meal services must provide service for those on medically restricted diets, including gluten-free. Information has been gathered from food banks in the Lower Mainland and support from gluten-free food providers has been elicited.
- Free advertising in the June newsletter will be offered to prior companies who have given us support.
- CCA national conference changed to a virtual event for 1,000 participants on May 2, 2020
- May Celiac Awareness Campaign: Could it Be Celiac? Locally proclamations for celiac awareness provided by the City of Vancouver, City of Richmond, City of Port Moody, City of Surrey and the BC Government. Vancouver City Hall, Science World and BC Place were lit up green to support celiac awareness. Social media campaign provides recipes, a coloring contest, and information regarding Board members. National information was shared as well.

CCA BC Annual General Meeting 2018/2019 Financials

CCA - BC Chapter Balance Sheet	Dec 31, 2019	Dec 31, 2018
ASSETS		
Current Assets		
Chequing/Savings		
Term Deposit	31,600	21,178
Chequing	25,177	23,451
Accounts Receivable	2,625	1,938
Prepaid Expenses	144	0
Inventory Asset	99	112
Total Current Assets	59,645	46,679
TOTAL ASSETS	59,645	46,679
LIABILITIES & EQUITY		
Liabilities		
Accounts Payable	799	133
Equity		
Retained Earnings	46,546	39,955
Net Income	12,300	6,591
Total Equity	58,846	46,546
TOTAL LIABILITIES & EQUITY	59,645	46,679

* Financials may change slightly when T3010 information is filed as more information is received.

CCA - BC Chapter Income Statement	2019	2018
Income		
Advertising - Newsletters	5,650	6,157
Donation - No Receipt Awareness	6,145	3,826
Donation - No Receipt Research	708	279
Donation - Receipted Awareness	17,243	23,201
Donation - Scotia Run 2019	0	565
Sales of Books	50	152
GST Refund	214	228
Interest Income	424	209
Membership Revenue	2,680	1,960
Total Income	\$33,114	\$36,577
Cost of Goods Sold		
Cost of Goods Sold	13	30
Total COGS	\$13	\$30
Net Income	\$33,101	\$36,547
Expense		
Bank Charges & Bad Debt	-39	138
Conference Expense	1,347	1,126
Donations to Charities	6,308	16,797
Event Expenses	1,939	2,444
GST, PST	769	656
Legal Fees	120	85
Insurance	785	562
Newsletter Expense	1,790	1,881
Office, Software, Training	312	322
Postage/Delivery	444	326
Printing/Reproduction	475	326
Rent	4,200	4,200
Telephone	1,021	866
Volunteer Recognition	270	
Website Expense	236	227
Total Expense	\$19,977	\$29,956
Net Ordinary Income	\$13,124	\$6,591
Other Income	0	0
Net Income	\$13,124	\$6,591

* Financials may change slightly when T3010 information is filed as more information is received.

CCA BC Annual General Meeting Financials

Submitted by Betty Wong, Treasurer

The following are the unaudited financial results for the Canadian Celiac Association British Columbia for 2019. Minor changes may occur when filing the T3010 (charity tax return) due year end 2020 because of the COVID 19 issues. Normally the filing is due June 30th of the next calendar year.

Revenue - 2018/2019

	2018	2019
Advertising - Newsletters & Scotia Run	6,157	5,650
Donation - No Receipt Awareness	3,826	6,146
Donation - No Receipt Research	279	708
Donation - Receipted Awareness	23,201	16,418
Donation - Scotia Run 2019/2020	565	0
Sales of Books	122	37
GST Refund	228	214
Interest Income	209	424
Membership Revenue*	1,960	2,680
Total	\$36,547	\$32,277

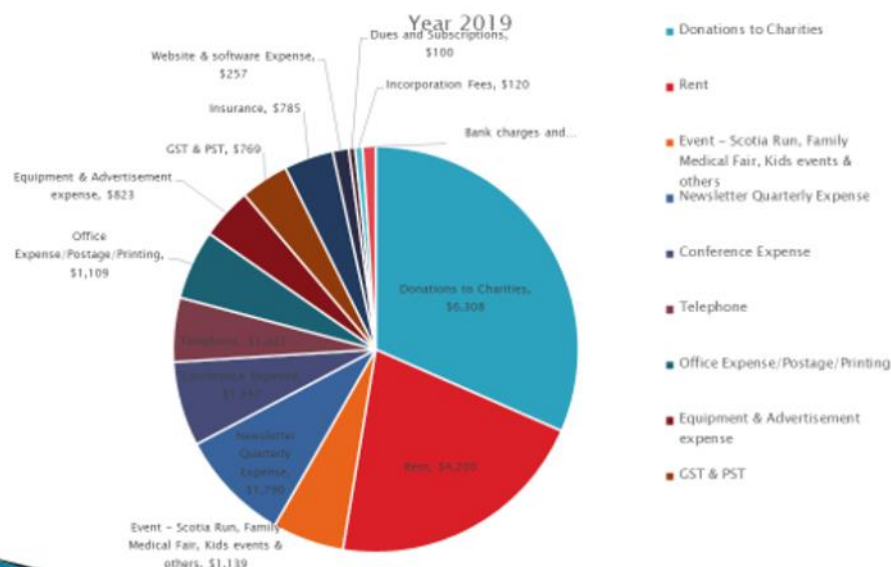
REVENUE: 2019 revenues were lower due to lower Scotiabank Run donations and advertising (\$6K). This was partially offset by higher membership revenue. Thanks to Canadian Mattress Recycling Inc. for a \$4.2K donation in both 2018 and 2019.

Expenses - 2018/2019

	2018	2019
Conference	1,126	1,347
Donations to Charities	16,797	6,308
Events	2,444	1,939
PST, GST	656	769
Insurance, Legal and Bank Charges	660	919
Newsletters	2,006	1,790
Office, FX, Training, Software and Website	549	495
Other Postage	326	444
Printing	326	475
Rent and Telephone	5,066	5,221
Volunteer Recognition	0	270
TOTAL	\$29,956	\$19,977

EXPENSES: 2019 expenses were down by \$10K from 2018 directly as a result of lower donations from CCA BC to the J A Campbell research fund for Celiac Disease (result of lower Scotiabank run donations). Insurance costs were higher in 2019 and there were minor increases in postage, printing, and telephone. This was partially offset by lower newsletter costs for postage as fewer members wish a paper copy. Event costs were lower as booth costs for the Family Medical Convention were covered by National. The graph indicates how money was spent in 2019. Note: the \$4,200 rent was donated back to our charity.

2019 Expenses



Zoom In to see details of the spending.

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Celiac in the Kitchen

Vegan Panko Crusted Brussel Sprouts



Recipe courtesy of Kinnikinnick and Head Chef Lori Grein

Ingredients:

- 2 cups Kinnikinnick Panko Style Bread Crumbs (220 g)
- 1 cup Kinnikinnick All Purpose Flour Blend (170 g)
- ½ tsp salt (2 g)
- 1 tsp black pepper (2 g)
- 1½ cups coconut milk (360 g)
- 1 lb fresh Brussel sprouts (454 g)
- Optional: Favourite Vegan Hot Sauce (gluten-free)

Directions:

1. Preheat oven 400°F (204°C). Line a baking tray with foil and lightly brush with oil. Set aside.
2. Wash Brussel sprouts. Remove tough outer leaves and trim stems.
3. In a shallow dish, add Kinnikinnick Panko Crumbs. Set aside.
4. In second shallow dish, combine Kinnikinnick All Purpose Flour Blend, salt and pepper. Mix until combined and set aside.
5. In third shallow dish, whisk coconut milk. Set aside.
6. Dredge Brussel sprouts working with a few at a time in seasoned flour, then coconut milk, then seasoned flour, then coconut milk, then Kinnikinnick Panko Crumbs. Place coated Brussel sprouts single layer on baking tray.
7. Bake in preheated oven for 15 minutes.
8. Remove from oven and toss coated Brussel sprouts in Vegan Hot Sauce.
9. Place Vegan Panko Crusted Brussel Sprouts back on baking tray.
10. Return to preheated oven and bake for an additional 5 minutes.
11. Remove from oven and let cool for 5 minutes.
12. Place in serving dish and serve immediately.

Brussel sprouts that are uniform in size for even cooking. Double dipping in flour mixture and coconut milk creates an extra crispy and thicker coating.



Crustless Smoked Salmon Quiche Sq.

Courtesy of ATCO Blue Flame Kitchen

<https://www.atcoblueflamekitchen.com>

Simple but oh so tasty!

Ingredients:

- 5 eggs
- ¼ cup light sour cream
- 1 tsp Dijon mustard
- 1 tsp dill weed
- ½ tsp freshly ground pepper
- ¼ tsp salt
- 1 ¼ cups light cream (10%)
- 1 pkg (85 g) smoked salmon, chopped
- ½ cup thinly sliced green onions
- ½ cup shredded Swiss cheese
- Garnish with baby tomatoes cut in half and basil chopped

Directions:

1. Whisk together first 6 ingredients (eggs through salt) until blended.
2. Whisk in cream.
3. Stir in salmon, green onions and cheese.
4. Pour mixture into a greased 8 inch (20 cm) square baking dish.
5. Bake at 350°F (180°C) for 35 - 40 minutes or until a knife inserted in centre comes out clean.
6. Let stand for 5 minutes. Cut into squares, garnish and serve.



Celiac in the Kitchen

Peanut Butter Bars

Submitted by Pushpa Kapadia, CCA BC Board Member – Recipe from:

<https://www.ambitiouskitchen.com/healthy-peanut-butter-twix-bars/>

Ingredients:

For the shortbread base:

- 1 ½ cups packed fine blanched almond flour (I use Bob's Red Mill)
- 3 tablespoons melted and cooled coconut oil
- 2 tablespoons pure maple syrup
- 1 teaspoon vanilla extract
- ¼ teaspoon salt

For the peanut butter layer:

- ⅔ cup drippy natural peanut butter (crunchy or creamy works)
- 1/3 cup pure maple syrup
- 1/4 cup coconut oil
- 1 teaspoon vanilla extract
- 1/4 teaspoon sea salt

For the chocolate layer:

- ¾ cup chocolate chips, dairy free if desired
- 1 tablespoon coconut oil

Directions:

1. Preheat oven to 350 degrees F.
2. Line an 8x8 inch square pan with parchment paper. It is important to use an 8x8 inch as a 9x9 inch pan may be too big.
3. In a medium bowl add the almond flour, coconut oil, maple syrup, vanilla extract, and salt.
4. Mix with a fork until it forms a nice thick crumb texture.
5. Add to pan and use your fingers to evenly press down into the pan.
6. Bake for 10 minutes. Allow crust to cool for 10 minutes before adding caramel.
7. Next make the peanut butter caramel layer: Add the peanut butter, maple syrup, coconut oil, vanilla extract and sea salt to a medium pot and place over medium-low heat for approximately 2 minutes until caramel starts to slightly bubble, stirring frequently. Pour over slightly cooled crust.
8. Place in fridge for at least 30 minutes-1 hour to completely harden the peanut butter. It should not take longer than this, but if you are impatient, just place in freezer for 15-20 minutes, this should speed up the process.
9. After 30 minutes or so, make the chocolate layer: Add chocolate chips and coconut oil to a microwave safe bowl and microwave on high in 30 second increments, stirring in between until chocolate is completely melted. If you prefer, you can also melt the chocolate and coconut oil in small saucepan over low heat.
10. Pour over the caramel layer and tilt pan side-to-side to evenly distribute the melted chocolate. Place in fridge for at least 20 minutes until chocolate is completely hardened and bars are cooled.
11. Remove bars from pan and cut into 16 bars (that resemble Twix bars). To do this, cut entire pan of bars in half, and then cut each half into 8 (1-inch) bars (not squares!), so you will end up with 16 bars. Enjoy! Bars should be kept covered in the fridge until ready to serve.



Celiac in the Kitchen

Scrambled Egg Tacos

Thanks to CCA PEI Chapter, Submitted by Monica MacEwen

Ingredients:

- 2 tbsp. olive oil
- 1 (15-oz) can black beans, rinsed
- 1/2 tsp. cumin seeds
- 1 clove garlic, finely chopped
- Kosher salt
- Pepper
- 4 c. baby spinach
- 1 tbsp. fresh lemon juice
- 8 large eggs
- 8 yellow corn tortillas
- Sour cream, crumbled queso fresco, avocado and cilantro, or your favorite topping for serving

Directions:

1. Heat 1 tablespoon oil in a large skillet on medium.
2. Add beans, cumin, and garlic.
3. Season with 1/8 teaspoon each salt and pepper and cook until garlic starts to turn golden brown, about 2 minutes.
4. Add spinach, remove from heat, and toss together until leaves just barely wilt.
5. Stir in lemon juice.
6. In a large bowl, whisk together eggs, 1 tablespoon water, and 1/2 teaspoon each salt and pepper.
7. Heat remaining tablespoon oil in a 10-inch non-stick skillet on medium.
8. Add eggs and cook, stirring with a rubber spatula every few seconds to desired doneness, 2 to 3 minutes for medium-soft eggs.
9. Lightly char tortillas under broiler or over a gas flame.
10. Fill tortillas with beans, eggs, sour cream, queso fresco, and cilantro, if desired.



Philly Bavarian Apple Torte

Ready In 4 h 5 m "Easy to prepare and absolutely delicious, this is a rich dessert perfect for special occasions."



Picture and recipe courtesy: www.philly.com

Ingredients:

- 1/2 cup butter, softened
- 1 cup sugar, divided
- 1 cup Rice flour
- 1 (250 g) package PHILADELPHIA Brick Cream Cheese, softened
- 1 egg
- 1/2 teaspoon vanilla
- 1/2 teaspoon ground cinnamon
- 4 Granny Smith or Golden Delicious apples, peeled, sliced
- 1/4 cup sliced almonds

Directions:

1. Heat oven to 425 degrees F.
2. Beat butter and 1/3 cup of the sugar in small bowl with electric mixer on medium speed until light and fluffy.
3. Add flour; mix well.
4. Spread onto bottom and 1 inch up-side of 9-inch spring form pan.
5. Beat cream cheese and 1/3 cup of the remaining sugar in same bowl with electric mixer on medium speed until well blended.
6. Add egg and vanilla; mix well. Spread evenly over crust.
7. Combine remaining 1/3 cup sugar and the cinnamon.
8. Add to apples in large bowl; toss to coat.
9. Spoon over cream cheese layer; sprinkle with almonds.
10. Bake 10 min. Reduce temperature to 375 degrees F; continue baking 25 min. or until centre is set.
11. Cool on wire rack. Loosen torte from rim of pan. Cover and refrigerate 3 hours before serving.
12. Store any leftovers in refrigerator.

Celiac in the Kitchen

Chapatti (Gluten-free and grain free)

Submitted by Pushpa Kapadia, CCA BC Board Member

<https://cook2nourish.com/2018/04/gluten-free-grain-free-chapati-roti-paleo-ajp-vegan.html>

Author: Indira Shyju

Cuisine: Indian, Fusion

Prep time: 20 mins

Cook time: 15 mins

Total time: 35 mins

Serves: 2-3, 10 chapatti's

Ingredients:

- $\frac{2}{3}$ cup cassava flour
- $\frac{1}{3}$ cup water chestnut flour
- $\frac{1}{4}$ tsp sea salt
- 1 tsp extra virgin olive oil
- 1 cup hot water (read instructions)
- 1-2 tsp more extra virgin olive oil (as needed)
- extra cassava flour for dusting
- 1-2 tbsp ghee (optional)



Directions:

1. In a large mixing bowl, add the cassava flour, water chestnut flour, salt, and oil.
2. Place a kettle filled with water on the stove to heat. Let it come to boil and then turn heat off.
3. Immediately measure 1 cup of this hot water and pour it into the bowl carefully. Use a spatula to mix the hot water into the flour mixture. After a few seconds of mixing, test how hot the mixture is by slowly placing a finger into the bowl.
4. Once the mixture is cool enough to be handled (should be still warm), use your hands to knead the dough and make a smooth dough.
5. Add the additional 1-2 tbsp. of olive oil as needed to make the dough smooth (should not be sticky).
6. Divide the dough into small balls (about 10)
7. Flatten each dough ball and then using a rolling pin flatten this ball to make a round (about 3 inches diameter).
8. Heat a cast iron (or non-stick) skillet or pan and when hot turn heat to medium.
9. Place the rolled chapatti onto the hot pan. Let cook for 1 min and flip to the other side. Now press the chapatti with a flat spatula and as you press it, it will start puffing up from all sides. Let cook for 1 more min and then transfer to a tray. If using ghee, apply a small dollop of ghee over the top of the chapatti.
10. Repeat the process for making more roti's as needed. (You can refrigerate the remaining dough for up to 2 days)

Notes:

You could refrigerate the cooked roti's, but they lose their original texture after refrigerating and reheating.

Celiac in the Kitchen

Panna Cotta

Submitted by:
Pushpa Kapadia, CCA BC Board
Member



Photo - commons.wikipedia.org

Ingredients:

- 1/2 litre plant-based milk (soy, almond,...)
- 85g caster sugar
- 40g corn starch
- 4 tsp vanilla essence
- Berry coulis ingredients:
- 250g mixed berries (you choose)
- Caster sugar to taste

Directions:

1. Add all vegan panna cotta ingredients to a smoothie blender. Use any plant-based milk you like. (Soy, coconut, almond). Blend the mixture until you get a smooth creme (alternatively you can whisk the ingredients as well until smooth, with no lumps; though a blender is much quicker and more efficient).
2. Pour the creme into a non-stick pan and cook on high heat for about 5 - 10 minutes until the creme thickens. Keep stirring all the time so it doesn't burn. You will notice that nothing will happen for a while and then all of a sudden the thickening process will start (that's the starch reacting to the heat).
3. Pour or spoon the thickened creme into ramekins (or little bowls) and let cool down completely in the fridge for them to set. This will take about 90 minutes.
4. Before you take them out of the fridge start making the berry coulis. You can use any variety and mix of berries you like. I used a mix of blueberries, raspberries and blackberries. Heat the berries in a pan on high heat until they turn into a coulis. No water is needed. The heat will break down the skin of the berries and turn them into liquid. You can blend the coulis if you wish it to be smoother.
5. Take the panna cotta ramekins out of the fridge and place on a dessert plate - they should come out of the ramekins fairly easily - if not, push in the edges with your finger to loosen it up and this will make it come out easier.
6. Drizzle the coulis on top of the panna cotta and garnish with a mint leaf. Enjoy!

Vegan Nanaimo Bars

Submitted by Lia Fairbairn, CCA BC Board Member

Adapted from : Sam Turnbull • It Doesn't Taste Like Chicken

Ingredients:

For the bottom layer:

- 1/2 cup vegan chocolate
- 1/2 cup vegan butter
- 2 cups gf vegan graham cracker crumbs
- 1 cup unsweetened coconut flakes
- 1 teaspoon vanilla extract



For the middle custard layer:

- 2 cups icing sugar
- 1/4 cup vegan butter
- 1 - 3 tablespoons non-dairy milk (I used almond milk)
- 2 tablespoons vegan custard powder

For the top chocolate layer:

- 2/3 cup vegan chocolate
- 2 tablespoons vegan butter (such as Earth Balance)

Instructions:

1. Line a 8" x 8" pan with parchment paper or foil.
2. **To make the bottom layer:** in a medium sauce pan, add the chocolate chips and vegan butter. Melt over low heat, continuing to stir.
3. Add in the graham cracker crumbs, coconut, and vanilla and stir to combine. Pour into the bottom of the lined pan and press down firmly. Pop it in the fridge to chill while you prepare the next layer.
4. **To make the custard layer:** add all the ingredients to a medium bowl and use a mixer to blend well. For a soft and gooey custard use 3 tablespoons of non-dairy milk, for a firmer filling, reduce the non-dairy milk to 1-2 tablespoons. Pour on top of the cooled bottom layer, spread evenly, and pop in the freezer to set for 15 minutes.
5. **To make the top chocolate layer:** add the chocolate and vegan butter to a small sauce pan and put over low heat. Continue to stir until all melted and take off the heat. Pour over the custard layer and spread to evenly coat.
6. Cool in the fridge for a couple of hours or overnight before slicing. For perfect slices, heat a large knife in hot water, dry off completely then use the hot knife to cut the bars. Store the bars in an air-tight container in the fridge.

Interview with Melissa Secord, Executive Director Canadian Celiac Association

Submitted by Lizbeth Wall, Past President, CCA BC

I would like you to meet Melissa Secord, the CCA's Executive Director. I first met Melissa at a CCA conference in 2017; she had just recently taken on the position and she was already making a difference with every breath she took. Taking time out of her busy schedule, I met virtually with Melissa to ask her some questions that members might be interested in learning about her and the CCA.

Tell me how you first got involved in with the CCA

I saw the posting after working for 15 years at the Ontario Optometrists Association. My experience includes working in health care advocacy, communication, and education. I was really looking for a new challenge and believed that I had a lot of experience to bring to a new organization. With CCA being a smaller charity and association, I felt I had the ability to create a high impact right away.

What has surprised you most about working with the CCA?

As someone who does not have celiac disease, I was surprised to learn how difficult a disease it is to manage on a day-to-day basis. I also didn't know all the lesser-known symptoms such as reproductive problems in women, migraines and the bone health complications. I learned quickly what a challenging disease it is to diagnose and to manage.

When I started, I found that this is such a welcoming, caring, and compassionate association. The CCA is a tight knit community; everyone cares. Celiac disease is a small disease in a big world. The CCA was doing amazing things and I was excited to have the opportunity to let people know all the behind the scenes activities that were going on.

What do you find most challenging about the CCA?

Resources. This is not a small organization in both financial and human resources. We are trying to do a lot on a shoestring budget. We must be careful to prioritize because we have limited funding.

What's the best thing to happen since you started working?

The best thing is to see the growth and that we are helping more people than ever before. It's incredibly rewarding when we change lives and empower people. I am particularly proud of our State of Celiac Disease and Gluten Free Leadership event last year. It was the first of its kind of event bringing leaders and stakeholders from across North America to discuss the major issues facing our disease what still needs to be done. It was an incredible day of insights and shows there is still a lot to be done and CCA can be leader in positive change.

What's the worst thing to happen since you started working with the CCA?

The worst is COVID 19 for a few reasons. Not only is it making life difficult and scary for everyone in the world, it's particularly devastating for the most vulnerable people in our community. It must be quite scary for individuals to have suddenly lost their jobs and now might have to rely on a food bank that may or may not have what they need to eat, especially if they have celiac disease. Individuals who are at greater risk for the virus may be forced to stay at home and rely on agencies to deliver their meals but is it safe for them to consume? We are working hard to see how we can help these individuals in need to feel safer.

For CCA, COVID has impacted our regular giving. We were extremely fortunate thanks to our donor community to have strong year-end festive campaign to help us for the first few months this year. But if we continue to have a reduction of donations, it will have an impact on what we can do especially as we approach summer. We have some tremendous supporters across Canada and we're focusing on the positive that we'll get through to the other side and be here to continue working on behalf of the community.

What do you wish other people knew about the CCA?

We are like the "little engine that could" and we have a small but dedicated staff team always ready to do better for the community. I hope people know that it is important to have a strong national voice fighting for the issues that still plague our community whether its food labelling, food safety or the need for the medical community to take this disease more seriously.

This an exciting time. Now more than any time in history there are exciting advancements in treatments and Canadians will have a chance to participate because of the strength of the CCA and it's recognition as a trusted and leading advocate around the globe.

When your friends/family find out that you work at the CCA what do they say or ask?

I did not know about celiac disease before I applied for the posting. When I tell people where I work it continually surprises me how many people come up to me saying "I have....." My family is proud of the work that I do.

What might someone be surprised to know about you?

I live and breathe CCA. It has become a part of my life even though I do not have celiac disease. When I am out even on my personal time, I am always looking for new GF products or evaluating what could help the community. I have a lot of passion and finding a healthy balance is always my struggle. When I do take downtime, I love to hike (can't wait to get to BC!), take photography and go camping with my family. I am passionate about helping animals and supporting our local Humane Society. My background is Political Science and Communication and I have an Association Management designation.

Interview with Melissa Secord

Continued ...

What would you tell someone who is thinking about donating and/or volunteering?

If you are interested in volunteering tell us about yourself, what are your interests and we will try and match you with what you are passionate about. Take the time to learn about what we do. Our Board has priorities, awareness, and education programs.

Donations are important for all of us. Donations provide such things as safe labelling and helping the vulnerable. You could be a peer champion. We need a voice in Canada to advocate by issues.

What do you think will change over the next five years?

The next 5 years is going to be so exciting! I have returned from a Research meeting about trials and innovations. We are on the cusp of incredible therapies. Celiac Disease is finally getting the attention of Pharma companies as they see the Celiac as a springboard to gastrointestinal issues.

How would someone describe you?

I love being a connector, the spark that gets things done. I am a doer!

What else can you tell me about the CCA?

In three years, we'll be 50 years young. We greatly respect all the past work that got us GF labelling, lead research and supported members. We hope the people in the BC GF community will continue to support the greater efforts as we transition a donor-based organized.

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Mouse Model Changes Study of Immune Response in Celiac Disease

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<https://celiac.org/mouse-model-changes-study-of-immune-response-in-celiac-disease/#>

By Van Waffle

The first mice with characteristics of celiac disease have been developed at the University of Chicago Celiac Disease Center. For the first time researchers can observe celiac disease onset as the mouse's immune system launches a coordinated attack against gluten.

In human studies it is only possible to use blood or small tissue samples biopsied from the gut. Such research has found various attack cells and particles that become active in celiac disease but cannot reveal how they coordinate their actions. Killer cells are recognized and even the chemical signals they use to communicate, but not the sequence of events that breaks tolerance to gluten and causes them to destroy the gut lining.

"It's great to work with human samples and it's critical, but it's very limiting because you cannot appreciate the interactions that are taking place between two cells in a timely manner. For fundamental research and to gain better understanding of the pathogenicity, the mouse model is key because we can monitor in time how the immune response to gluten develops," says Valerie Abadie, PhD, Research Assistant Professor at the University of Chicago Department of Medicine, Section of Gastroenterology.

Mice have previously helped scientists study gluten sensitivity. However, they did not bear the hallmarks of celiac disease. They had to be in an immuno-compromised state distinct from celiac people who have active, sensitive immune systems. The mice had to be fed an adjuvant: a catalyst acting alongside gluten to provoke a reaction. Such studies overlooked how the celiac immune system responds to an initial stressor and begins behaving abnormally.

In contrast, the new mouse model has the same genetic markers for celiac disease as human patients. When fed a gluten-containing diet, within a few weeks the mouse's immune system begins producing the same kinds of attack cells and chemical signals. Inflammation develops leading to damage of the gut lining.

These celiac disease characteristics were required to be able to study the disease properly in mice, says Bana Jabri, a mucosal immunologist and Professor of Medicine, University of Chicago Celiac Disease Center, whose lab developed the mice. The new model was described recently in *Nature*.

From studies in people with celiac disease it is known that their gut lining produces abnormally large amounts of a stress signal protein, interleukin-15 (IL-15), in response to gluten. It activates both the body's first line of defense against an unwanted intruder and the second-line, more targeted response called adaptive immunity. The latter

produces antibodies specific to celiac disease, anti-tissue transglutaminase (anti-tTG), which destroys the gut lining.

However, human studies have not yet discovered what initial stressor provokes the gut lining to overproduce IL-15, Jabri says. It might be due to genetics, microbes in the gut or some other factor acting in the intestine. She adds, "This is something that we would really like to study."

Abadie was a member of Jabri's team that developed the mouse model. Abadie's research continues with funds from the [Young Investigator Award](#) provided by the Celiac Disease Foundation.

Her next study focuses on the role of B cells, a kind of white blood cell. B cells are required to capture an offending particle like gluten, disassemble it and present its parts to T cells so they can learn how to make anti-tTG. Once primed to do so, T cells activate an immune response whenever a celiac patient ingests gluten.

While the role of T cells is well-known, the participation of B cells is critical, according to Ludvig Sollid, PhD, MD, Professor of the Faculty of Medicine, University of Oslo, Norway, speaking at the Celiac Disease Foundation-sponsored [Columbia University Biennial Symposium](#) in New York in March. Sollid said the B cells "must have unusual metabolism" to perform this function.

There's little evidence for how and when B cells interact with T cells in celiac disease. Abadie's research seeks to identify the cross-talk. With this knowledge, researchers could then explore how to suppress the immune process that produces anti-tTG.

"We cannot yet treat a patient with a B cell depletion therapy if we don't know where B cells are acting, and what they do and when," Abadie says. "Do B cells play a role always, even if we have a recall response [to later gluten exposure]? We don't know."

She cautions that it will take time to find a treatment: "COVID is actually a very good example for that. We need to test things before implementing treatment like vaccination. It doesn't happen in a month. It's got to happen in 18 months."

Jabri and Abadie emphasize the importance of integrating studies in humans and mice. Without studying humans it is impossible to know the characteristics of the disease. The new mouse model allows scientists to investigate the immune response more closely than ever before.



Navigating Through First Year University as a Celiac

Submitted by Lia Fairbairn, CCA BC Board Member



Heading off to university is a pivotal moment in most people's lives, but for someone with celiac disease, the stress of the situation is made even worse. Since Grade 10, I had been attending university presentations at my high school, plotting out my future, and crafting spreadsheets about the pros and cons of each choice. The summer before

entering grade 12, I had to begin factoring my diet into my post-secondary options. I was communicating via email with disability services, dietitians, and food services across the country, trying to determine what, and where, my safest options would be. Unfortunately, a lot of the universities I wanted to attend, such as the University of Calgary and McGill, either neglected to return my emails or had extremely limited options in place. I wouldn't feel safe eating there. Of course, there are a lot more extreme barriers in the way of accessing post-secondary education, but I still felt rather hurt that this autoimmune disease was preventing me from attending certain schools.

Some schools had amazing options. Queen's University, for example, where I had a personal meeting with the dietitian and head chef, along with a tour of the gluten-free kitchen. In the end, I picked UBC, which was mostly an academic choice, but I also felt I would be safe eating and living there. UBC had a unique option for first-year celiacs which I didn't see at any other Canadian schools, in that celiacs would be housed together in 'apartment-style' housing, complete with a kitchen for each apartment, thereby negating the necessity of a meal plan.

Once I had made this huge decision about where I wanted to spend the next four years of my life, I was eager to get started the following fall. After move-in-day on August 31st, I met my three celiac roommates, and gradually got to know the rest of the celiacs in our little hall. There was certainly a community aspect, with potluck dinners, celiac movie nights, and meals out to gluten free friendly restaurants in Kitsilano. My Residence Advisor was also celiac and extremely sweet, and I always felt catered for at the residence events. I met amazing friends and am so glad to have had this experience. Of course, there were also negatives. Living in upper year residence meant that our rent expenses were more than most first-years. Luckily, I have been baking and cooking for years, but I know that several students struggled in ensuring they were making healthy choices, not spending extortionate amounts on groceries, and fitting in the time to meal prep amidst their busy schedules. As well, although we had a small community of celiacs, we did perhaps miss out on the more standard dorm life and social experiences.

Although I felt safe living and eating in my residence, the rest of UBC was a hazard zone. Imagine Day, a huge

orientation day for first-years, served subway sandwiches, whilst I ate a granola bar. This occurrence was repeated multiple times throughout the year, from study abroad orientations to volunteer trainings. The vast majority of the restaurants, cafes, and food chains on campus are unaware of the precautions necessary to cater for celiacs, so most of the time I chose to make my own food. Notable places I did feel safe eating at were Virtuous Pie, Jam Jar, and the Soup Market. Despite my successes in UBC residence, the campus remained a bit of a danger zone, as restaurant staff had not been trained in the particularities of catering for allergies, and UBC events often neglected to acknowledge students who needed other diets.

I have learnt a lot from this experience, and I hope that through this article, others who are entering university soon can also take my experience into consideration. Of the utmost importance to a successful university experience as a celiac is extensive research. I would recommend writing a list of your top university choices, and getting in touch with dietitians, housing and disability services, food and catering, or whoever is in-charge of allergy precautions at each school. Unfortunately, there is quite a lot of disparity between schools in terms of the precautions they do take as well as who is actually knowledgeable on the subject, so make sure to get in contact early to ensure you have time for a winding trail of email responses and answers. If it is possible to tour the university and set up a meeting with the dietitian (if there is one), I would highly recommend doing so. After visiting McMaster and Queen's and touring their dining halls, and even meeting some of the chefs, I felt a lot more comfortable at the prospect of moving across the country. After seeking out the available options, try and figure which configuration you would be comfortable with. For instance, I did not want to share a small kitchen with thirty other non-celiac students, which is why I had to scratch McGill off my list.

Above all, you are entering university for academics (hopefully), not the food options. There is always a way to adapt, whether that means renting a place off campus where you can eat safely or commuting to a local school. It is all about compromise, and the most important decision is to try and find a way to get the social life you are wanting, whilst feeling safe and healthy, and also ensuring you are attending the university that suits you best academically. It is obviously not an easy decision, and I made pros and cons lists for months, up until a few hours before the final decision deadline on May 1st.

Best of luck for students struggling with dietary concerns whilst entering university!

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Scotiabank Charity Challenge – Virtual Race

Submitted by Val Vaarnou, Past President CCA BC

COVID 19 and the subsequent social distancing that we have all become accustomed to have changed the way we live. It also changed the way the Scotiabank Charity Challenge would be managed in 2020.

At the time, I am writing this article we know the basics of what the Virtual Run will be this year. If you have any questions, please contact us info@bcceliac.ca.

*The great news is that it does not matter where you live, you can take part in this year's run!
We would love to have you take part!*

*Whether you live in Victoria, on Vancouver Island, in the Yukon, Kelowna, Kamloops or
wherever in BC (Canada) you are welcome to join us.*

CCA BC's Sign up Link:

<https://raceroster.com/events/2020/26313/2020-scotiabank-vancouver-half-marathon-and-5k/register?team=222471>

Event information page: <https://canadarunningseries.com/scotiabank-vancouver-half-marathon/virtual-race/>

FAQ: <https://canadarunningseries.com/svhm-faq/?top-category=covid-19>

1. The race(s) will occur between June 29 to September 18. Fundraising can continue to October 9, 2020. The virtual race is either 5K, 10K or 21K. Runners can input their time into the system as many times as they wish. How we do the race is at the discretion of the individual and the charity and information will be sent out to all members after the May CCA BC Board of Directors meeting. The fee for the race will be \$35 and registration is open until early September.
2. Since it is a virtual race, "runners" supporting the charity can expand to anywhere. Runner will get:
 - Virtual bib which can be downloaded
 - Souvenir t-shirt – will be mailed
 - Souvenir medal – will be mailed
 - Virtual finisher badge
 - Achievement badges on fundraising page and notification emails of attaining results.
3. Anyone raising over \$2,500 will get Scene credits (Scotiabank movie credits). All donors will be entered into a draw for 5 \$100 gift cards for NHL sports
4. Race Roster has updated their Social Media banners and graphics for the virtual event. #ScotiaCharityChallenge and #ScotiaHalf. They would like participants and charities to share photos and stories with them so they can retweet and share as well.
5. Every 2 weeks Race Roster will download times and send out medals and t-shirts to those qualifying. People can run and change their times as many times as they wish during the event.

The CCA BC is working to provide fun prizes and gifts for participants, as well as setting up a Facebook community for the event where we can share our pictures and experiences. Join the fun and fundraise for local programs, creating awareness and research to find a cure!

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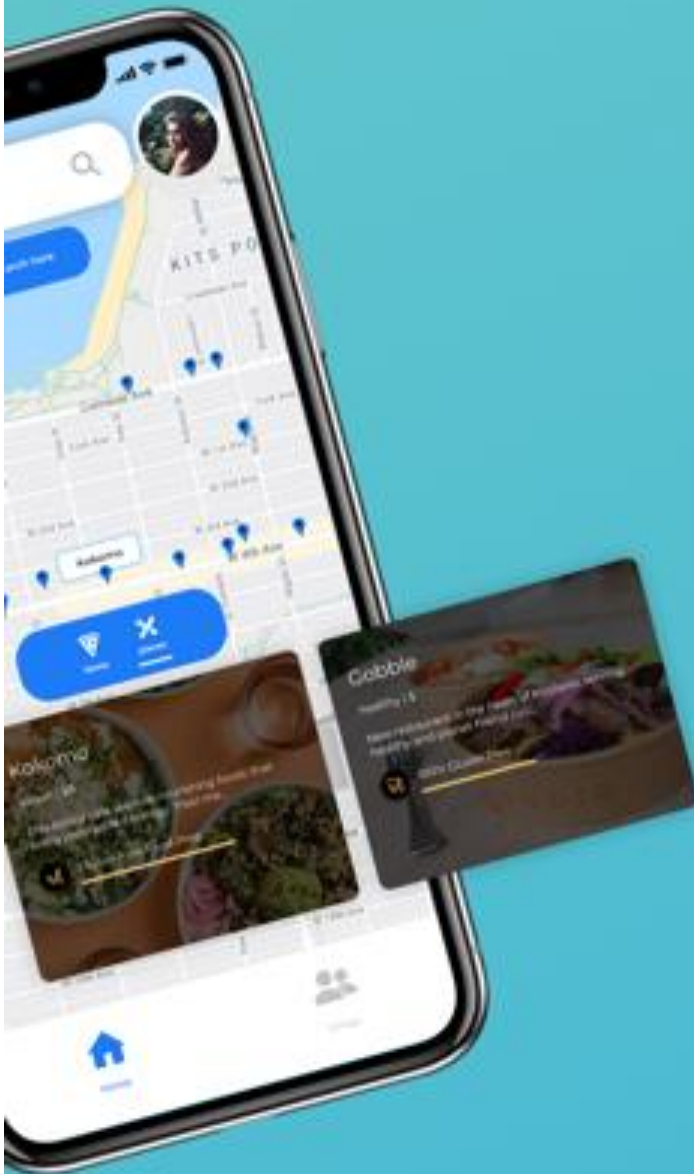
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Selena De Vries, RD, Her Story



Registered Dietitian and member of the CCA Board of Directors, submitted by Lizbeth Wall, Past President, CCA BC. Selena also established a celiac Kids Camp and offers Support Groups in Kelowna

I was diagnosed about 7 years ago now and did not experience the typical symptoms when I was diagnosed. I had just graduated as a dietitian and found out I had low iron stores but was not yet anemic. It made sense to me as I was, frequently, quite tired but just related that to the busyness of school and long days during my dietetic internship.

None the less, there was no reason I should have had low iron stores considering my lifestyle, diet and medical history at the time. So, I asked for a celiac screen test to check for anti-tTG antibodies and it came back just slightly elevated. The family physician (GP) mentioned that I was just 'gluten sensitive' and would need to be careful with ingesting gluten but that it was unlikely to be celiac disease. No referral to a gastroenterologist (GI) was mentioned.

Luckily with my background as a dietitian, I knew that that wasn't quite right, and I advocated for a referral to a GI who completed an endoscopy which is the gold standard procedure to diagnose celiac disease. It came back positive for celiac disease. My GP followed up with me and then mentioned "well, you're a dietitian so this should be easy right!" Certainly, I was lucky to be in the profession I am, but I think we all know that living with celiac disease is no walk in the park.

When I look at my family history, it seems that celiac disease runs on my dad's side of the family. My grandpa (my dad's, dad) always had a very swollen belly. So much so, he had such a poor appetite and would barely eat. Looking back, this was likely celiac disease that was never diagnosed. In addition, my aunt (dad's sister) has nine kids and three of my cousins have celiac disease.

What have your challenges been? Any ah ha moments?

In terms of education, being a dietitian was very helpful. I was able to adapt to the diet guidelines quite easily. Reading a label was easy for me which was very lucky as I was diagnosed after 2012, which was when the new label reading regulations came into place. My cooking skills made it easy for me to try new foods that were unfamiliar to me.

Yet, I struggled with eating out and found it terribly difficult to have to eat different foods than others, not being able to reach over a take a bite of my husband's or friend's food, or, simply, just share a platter of food with others. Looking back, eating without worry with others was something I really took for granted.

It took me a while to get used to advocating for myself, learning to ask the right questions and finding new ways to socialize that didn't involve food so I could just be part of the group and not even have to think about celiac disease. It has been hard. It still is to be honest. But, not nearly as much as what it once was. Time makes everything easier and it is so true with celiac disease. It's a part of my life now and I accept it.

What is your biggest suggestion to someone newly diagnosed?

If I had to pick only one, it would be, do not fall prey to "Dr. Google." Get off the internet and get in to see to a registered

dietitian (RD) that specializes with celiac disease. Just as there are doctors that specialize in certain conditions, dietitians specialize too. A gastroenterologist is a specialist in GI conditions and the equivalent specialist dietitian is a GI dietitian. If you have celiac disease, see a GI dietitian with celiac expertise. They are, literally, your best friend when it comes to getting your health back.

If I could include a few more, I would suggest connecting with others by finding a support group, locally to you. In Kelowna, I have an online FB group page here (<https://www.facebook.com/groups/205106490374369/>) and an in person support group at Mountainview Church from Sept-June. However, currently all in person meet ups are cancelled due to COVID 19.

The last one would be to look to credible resources. The Canadian Celiac Association (CCA) has many great free resources for starting out gluten free and can be a great first step!

Tell us about your experience on the CCA Board.

I have been on the board of directors with the CCA for about three years now. It has been a great experience working with such an amazing group who work tirelessly to improve the lives of individuals with celiac disease. Currently, my main role is to act as a liaison between the Professional Advisory Council (PAC) and the CCA Board of Directors. The current PAC is a team of GI's, GPs and RDs who provide the board with medical and research-based information. It's my job to help inform the PAC of board initiatives that would require their expertise/input and/or to inform the CCA board of PAC work that may influence the board's main initiatives.

Why did you become an RD?

I became a dietitian because I love food and I love health. A dietitian sounded like the perfect blend of those two. I have to admit though, I was intimidated by the amount of sciences and pre-requisite's there were to get into dietetics. I actually looked at a one-year certificate program before diving into becoming a dietitian. But I knew RD was for me. I wanted to have a science-based degree that was recognized as evidence-based and credible in the larger health community. I wanted to be immediately employable with a decent wage after I was done so I could start paying back hefty student loans! And, I, eventually, wanted to own my own business and wanted my services to be covered under insurance plans so my patients could be reimbursed for our time together which registered dietitians often are (although though most people don't know this!).

I, now, do own my own business through Healthbean Nutrition where I offer 1:1 online consults for individuals with celiac disease across BC and Canada. I also offer an online group program for those who are newly diagnosed with celiac disease and for those who continue to struggle with symptoms on the gluten-free diet.

You can connect with me on Instagram @celiac_dietitian or visit me at my website www.healthbean.ca.

Thanks to Selena for all she does for celiacs!



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The Griffith Family, Their Story

Submitted by Lizbeth Wall, Past President CCA BC

I met Stephanie almost 20 years ago, long before the word gluten-free and celiac were in our vocabularies. Little did we know what our futures were soon going to look like. Stephanie's family has a unique twist that I think you will find most interesting. We thank Stephanie for taking the time to describe how Celiac Disease has affected her life.

We asked Stephanie to tell us how her family was first impacted by Celiac Disease

We found out about celiac disease by accident, thanks to an observant pediatrician. Our 12- year old daughter, Maddie, who was healthy, athletic, a strong soccer player, was seeing a pediatrician, Dr. Glenn Robertson for a reason unrelated to celiac symptoms. Dr. Robertson ordered blood tests. Unbeknownst to us, she ticked the box for the tTG test because Maddie had dark circles under her eyes and had a bit of anxiety about going to sleepovers, which also can be a symptom.

I received a call two days later saying that her tTG levels were literally off the chart (the test only goes to 250) and it was likely that Maddie had celiac disease. Maddie was also confirmed to have an iron and vitamin B deficiency, which explained the dark circles under her eyes. Maddie was referred to a gastroenterologist, Dr. Mark Riley for an endoscopy – the gold standard for diagnosing celiac disease. Dr. Robertson, also mentioned that celiac can be familial, so suggested the whole family get tested. I was pretty sure that my husband would test positive, as like Maddie, he did not like eating muffins, pizza, bread etc. while I was sure my 15 year old son and I didn't have it as we loved gluten and my son was a very talented strong soccer player – no way did he have celiac.

Well the tests showed that, like Maddie, both my husband and son Ty likely had celiac disease. Ty's tTG levels were also off the charts and he too was deficient in iron and vitamins. Deryl's tTG levels were at 90. Neither Ty nor Deryl had any symptoms and we were shocked. Given that Dr. Riley diagnosed Maddie with the scope, we asked that Ty and Deryl also receive the scope too.

What have your challenges been?

In the beginning it was challenging for my daughter to go to birthday parties and not be able to eat anything. We got around it by bringing her own GF cupcake so she could feel part of the crowd. My son was embarrassed about having it – he was in grade 10 – and didn't want anyone to know. Once his buddies found out, he was definitely more relaxed about it.

These days our biggest challenge has been travel. Flying is not friendly when it comes to ordering food on planes, so the family often eats before we leave, or we bring snacks. We have also found that many restaurants are not as knowledgeable about gluten-free. If we are trying a new restaurant, I will check them out online or call ahead. If it seems like they don't know what celiac is, then we don't go! My husband also finds it challenging in business

meetings when lunchtime rolls around. Even though people know he is celiac, more times than not, he doesn't get anything or perhaps a plate of lettuce leaves.

Any ah ha moments?

Happiest moment was when we learned that McDonalds French fries are gluten-free!

When we're travelling, I also always check out restaurants in advance and call them if it isn't clear on their menu that they offer gluten-free. I've found Trip Advisor to be useful too and I now review any restaurant that we have been to with a good gluten-free offering – including local restaurants here because I want travellers coming here to be able to find good restaurants also.

When Maddie and Ty were diagnosed we were so lucky to have a great pediatric gastroenterologist who explained everything to us all and who had follow-up appointments with them every 6 months to keep an eye on their bloodwork and just for a general checking. I can't say the same with Deryl's gastroenterologist. When he went over the scope results with Deryl he seemed so blasé and even said that because Deryl has never had major symptoms it was his choice as to follow the gluten-free diet or not – I couldn't believe that advice! He also basically said "see ya" after his appointment and there is no follow-up. Again, I was so grateful we had the support from Dr. Riley to help guide us through.

Overall, we were lucky that the damage to all of their villi has very likely fully healed – Dr. Riley told us that Ty was about 6 months away from being severely sick but is now fully recovered. Today, they are all able to feel like they are living normal "eating" lives. They have been glutened and now have major reactions when that happens. Thankfully, those instances have been few and far between – they always occur after eating at a restaurant, but to them it's worth the risk to be able to go out to eat.

What is your biggest suggestion to someone newly diagnosed?

My biggest suggestion is to take a deep breath and relax. A celiac diagnosis is not the end of the world and life can be normal, you just have to plan a bit more than you normal, especially when it comes to eating out.



Featured Gluten-Free Business: Innocent Ice Cream

Submitted by Lizbeth Wall, Past President, CCA BC,
Interview with Asacia Biln, Founder Innocent Ice Cream

Last year I was on Main Street to pick up my bib for a running race and I remembered a friend telling me about one of the best dessert experiences she had had in a long time. Realizing I was not far I ventured into Innocent Ice Cream and devoured the best ice cream and cookie sandwich ever! I reached out to the owner, Asacia, and soon met with her and delighted in her passion and enthusiasm to make a difference.

I hope you enjoy our conversation with Asacia and learning more about this very unique business. We truly appreciated her taking the time to tell us all about Innocent Ice Cream. I know where I'm heading back again soon!

What is your background?



ASACIA BILN, FOUNDER

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Growing up in the countryside outside of Nelson, BC, I lived a very homegrown lifestyle. We ground our own flour, raised our own animals and grew the majority of the fruits and vegetables we ate. Slowly our lives shifted to a more "conventional" way of living and we began to buy our staple food items. Right away, I noticed a sensitivity to bread products. I assumed I was allergic to wheat and simply shied away from it. My mom and I loved baking, so we started to experiment with non-wheat flours. These were the 80's and products available were few, and barely palatable, as were our first baking results! As time went on, the quality of "alternative" flours improved, as did my savvy in gluten-free baking. We baked cakes, muffins, tortillas, scones and most often cookies. These coupled perfectly with the fresh ice cream we would make on special occasions. For me, the pairing of cookies and ice cream would come to represent celebration, togetherness, and joy.

What prompted you to start your gluten-free business?

I continued to share this tradition with my family and close friends, a handful of which were Celiac, and so began the early days of Innocent Ice Cream Sandwiches, home of the world best gluten-free ice cream sandwiches!

In the Spring of 2015, I bought Innocent's first ice cream tricycle, jumped into production, and toting an ice cream sandwich that would make my mom proud, cruised the Vancouver Seawall "pedaling" frozen joy. Innocent Ice Cream Sandwiches found its first home in a gluten-free church kitchen in Kitsilano, which we still honour with grateful hearts (and the halo in our logo)!

As one of Vancouver's first companies to offer an ice cream sandwich and the only one to make them gluten-free, our first season was an epic success. Vancouver's obsession with ice cream was well underway, but its love affair with ice cream sandwiches was only just beginning.

In one short year, we had outgrown our tricycle. With weddings, festivals, film sets, pool parties, bat mitzvahs and more, the requests were flooding in and we only had three wheels! In 2016, our solar powered ice cream truck, "Sunshine," joined the fleet. We set up shop at English Bay Beach and traveled around town to every shindig we were invited to. The response was overwhelmingly positive, and our hearts were filled with gratitude. By the end of the season, we had our sights set on the future.

And it was a successful vision for Asacia and her family. After two years on the road, Asacia was ready for a place that they could call home. In early spring of 2017, they took over an existing coffee shop on Main Street in Vancouver. With Asacia at the helm, her daughter as store manager, and Asacia's mom as baker extraordinaire, Innocent Ice Cream opened its doors on the first day of summer.

Where are your products produced? Is the facility dedicated?

All of our products are produced on-site at our Main Street location, in our gluten-free dedicated facility and while we can't afford the hefty fee to have our location certified gluten-free, we DO have our products 3rd party tested 3 times a year to ensure we are maintaining the gluten-free standards our customers expect from our business.



Featured Gluten-Free Business: Innocent Ice Cream

What have the challenges been? What successes have you had?

We really struggled finding a good source for gluten-free flour mix that was not prohibitively expensive. We ended up sourcing all our own ingredients and had a local gluten-free company blend and package our flours for us. In the beginning, finding gluten-free ingredients was challenging but with all the options now, we no longer stress about developing new recipes and finding reliable sources for the ingredients. I knew we had a fantastic product and was excited to share it with our community but definitely worried that our niche would be too small to be sustainable. We were delighted to find that most people who walk through our doors and try our ice cream sandwiches don't even know they were gluten-free! So, in the end, we were able to offer a Celiac-safe product but serve the entire community, a saving grace for a "niche" company.

What do you see in the future for your business?

Because our products don't travel very well, we would love to bring our stores to other communities. Many of our customers travel from Vancouver Island or the Okanagan to bring home our treats to their friends and family so opening new storefronts there are possibilities in the years to come.

What products do you sell? Where can they be found?

There are 3 ways to get your hands on our treats! Have us come to you: We have an adorable food truck that caters corporate and community events and a sweet pink tricycle that is the perfect addition to weddings, birthdays and baby showers! For the full experience of what we have to offer, pop over to our Main Street storefront. We specialize in gluten-free ice cream sandwiches that come in full size and mini size. Our most popular is the flight of three mini's, as they give you an option to try three different flavours! Most people order this the first time they come and then choose their favourite in full size next time or make their way through our menu mini's. We have 16 different ice cream sandwiches to choose from, but you can custom create your own from the 5 fresh baked cookies and 24 ice creams we offer. The options are endless! If ice cream sandwiches aren't your thing, we offer scoops in freshly made waffle cones, layered ice cream pints, ice cream cakes, soda floats, affogatos and more!

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Trust Your Gut - We Are Always Learning...

Submitted by Julie Clement, CCA BC Board Member



As a child growing up in the 1980s my knowledge of celiac disease was limited to a vague knowledge that a friend's older sister had a condition that meant she couldn't eat bread and would "maybe die" if she did...

Fast forward 15 years or so and my knowledge probably wasn't an awful lot greater! When I started experiencing a

painfully itchy rash, I certainly never imagined it could be caused by eating my favourite foods or that I would be diagnosed with the mysterious "celiac disease". Like so many people with atypical symptoms my road to diagnosis was long, it took well over 2 years before I was referred to a dermatologist, but he took one look at me and diagnosed me on the spot - a textbook case of dermatitis herpetiformis. Thankfully, I was given good advice and was told not to go gluten free immediately, and celiac disease was confirmed by a skin biopsy and scope shortly afterwards.

Once I told my family things started to make sense - constant anaemia throughout my teens, with family doctors treating the symptoms instead of investigating the cause; permanent bruises all over my body as a child; worsening of the rash when I was in Europe and stuffing myself on French bread...; and of course a wealth of extended family members with the catch all diagnosis of IBS or non-specific stomach issues.

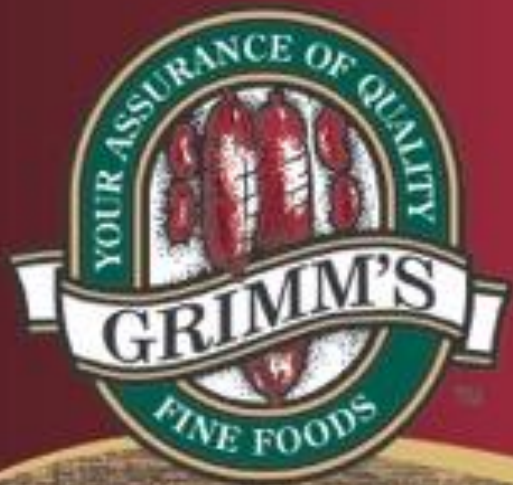
I was lucky in one sense in that I was diagnosed in my 20s, past the years of university accommodation food, heavy beer drinking and so on, and so I found the adaptation to a gluten free diet fairly easy, and the immediate improvement in symptoms. The fact that there was no need to take medication on an ongoing basis made it a no-brainer.

I was always told that the risk of a child of a celiac parent developing the condition is much higher than in the general population and was advised not to necessarily have any future children tested as a matter of course, but to keep a close eye on their health and consider celiac as a first port of call if anything arose.

When my now 12-year-old daughter was born she was slightly under average weight at 6lb 6 oz but grew like a weed and was always off the charts for her height. She never exhibited any intestinal issues or skin rashes and so I assumed that, at that point in time at least, she was not celiac. Around the time of her seventh birthday her personality changed, almost overnight. She had incredible rages, shouting and throwing things, literally having to be

dragged home from school where she would explode and kick the walls and furniture. We put up with this, thinking it was her age, we spoke to the school in case there was any bullying occurring, but celiac disease never crossed our minds. When my parents visited, they took me to one side and told us that whilst they loved her unconditionally, this wasn't normal, and she wasn't the same child they had seen just 6 months previously. Our family doctor felt it could be nutritional, yet even that trigger word didn't make me consider celiac. She ordered blood tests and suggested we try a gluten free diet for 2 weeks. When I got home and was chatting to another celiac friend, she pointed out that in children in particular, celiac can manifest as behavioural issues. I couldn't believe it but called the doctor and asked her to add celiac testing to the others she had requested. When we received the confirmed diagnosis, I was blown away - I had run the celiac support group for my local area in the UK for many years yet had still been blindsided. Her improvement on the gluten free diet was immediate, within 48 hours she was back to normal. That was 5 years ago and when she is glutened she still rarely experiences intestinal issues, but my goodness we noticed the change in her mood and behaviour!

As I said, she was always tall, gained weight on target, was never sickly, she has a black belt in taekwondo and competes in track and cross country for her school. If there is a moral to this story it is that not all children experience the "failure to thrive" that many doctors may associate with celiac disease; many children manifest as being completely healthy but if undiagnosed will continue to damage their small intestines and potentially develop longer term complications. If in doubt, you're their parent - trust your gut if you feel something is wrong! I certainly will if my 8-year old's health or behaviour changes in any way!



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