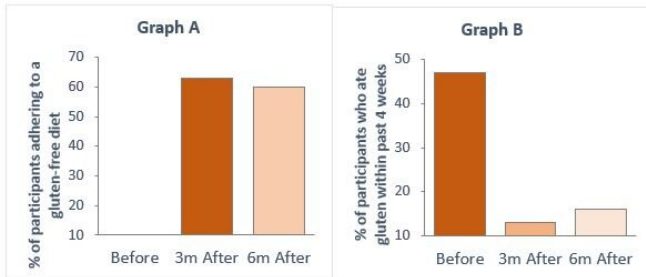


Telephone clinics can be effective in helping patients manage celiac disease during and post-COVID-19

9 November 2020



Graphs from the study showing the increased adherence to the gluten-free diet after the telephone clinic and better diet awareness of participants. Credit: University of Roehampton

A first-of-its-kind study from the University of Roehampton has found that the use of telephone clinics improved adherence to a gluten-free diet in adults with celiac disease while at the same time relieved pressure on NHS services, providing vital data for how patients can be consulted during and post-pandemic.

The research involved 125 patients with celiac disease in the U.K., where the patients who reported difficulty adhering to a [gluten-free diet](#) were offered a personalized [telephone](#) consultation by Humayun Muhammad, gastroenterologist and senior research fellow at the University of Roehampton. Between February 2018 and February 2019, the research found that the telephone clinic improved patients' ability to adhere to the gluten-free diet for up to six months. As such, this service has proven to be a highly effective way to assist those living with celiac disease in the long term.

In the study, patients' level of adherence to a gluten-free diet was based on a scoring framework

after completing questionnaires at three, six, nine and 12 months following the telephone consultation. Patients involved in the study were split into two groups: One group included those deemed to be adhering to a gluten-free diet before the clinics (the [control group](#)), and the second group comprised those who were not (the intervention group). The findings concluded that 63% of participants in the intervention group showed better adherence to the diet after three months, which remained at 60% after six months (Graph A). Additionally, only 13% and 16% of this group reported consuming gluten over the previous four weeks both three and six months post telephone clinic respectively, compared with 47% before (Graph B).

Key conclusions suggest that a telephone clinic format should be offered to patients now and beyond the current COVID-19 pandemic, as it reduces patient burden in attending outpatient or GP appointments and is time-, space- and cost-effective for the NHS. Indeed, as annual follow-ups are recommended by experts and important for patients to continue to follow their [gluten-free](#) diet, particularly for those new to it, the resource savings have the potential to be substantial for GP practices. Importantly, the study also provides a framework for further research globally into other ways telephone clinics can be used for treatment and advice for patients as NHS and health services come under increasing pressure due to the ongoing pandemic.

Celiac disease affects approximately one in 100 people in the U.K., meaning there are hundreds of thousands of British people living with the disease, which can only be treated by removing all gluten from their [diet](#), requiring substantial changes to lifestyle.

Lead author of the research, Dr. Yvonne Jeanes, Registered Dietitian and Principal Lecturer in the Department of Life Sciences at the University of Roehampton, said, "The COVID-19 pandemic has left our NHS facing its biggest challenge in decades and it is crucial that ways of alleviating pressure on [health services](#) are identified and explored. Our study shines a light on telephone clinics as an intervention for adults with celiac [disease](#) and the positive results provide data for evidence-based practice to follow, both for the foreseeable future and in a post-COVID world. From our findings there is scope for further exploration into how telephone or online clinics can be more widely used in treatments and guidance for [patients](#) suffering from a range of diseases which require regular consultation."

More information: Humayun Muhammad et al. Telephone clinic improves gluten-free dietary adherence in adults with coeliac disease: sustained at 6 months, *Frontline Gastroenterology* (2020). [DOI: 10.1136/flgastro-2020-101643](https://doi.org/10.1136/flgastro-2020-101643)

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Provided by University of Roehampton

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