Health & Medicine

Study: "Wheat Sensitivity" is Real

By David J. Craig | Winter 2016-17



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A team of Columbia scientists say they have found the first physiological evidence that people who test negative for celiac disease and other forms of wheat allergy can still get sick from eating wheat.

In a study published in the journal *Gut*, the researchers say they found signs of wheat-inflicted intestinal damage and inflammation in dozens of such patients. The

researchers have not yet determined if gluten — a protein in wheat that provokes an autoimmune reaction in celiac sufferers — or another component of the grain may be making people ill.

Physicians have lately struggled to make sense of the fact that many patients complain of feeling sick after consuming wheat and related grains even though they lack the diagnostic markers for celiac disease — which include a particular antibody in the blood and a distinct form of damage to the intestine. Some have suggested that increased public awareness of celiac disease has led people to imagine their symptoms. Others insist that these patients are suffering from a disorder similar to celiac disease — "non-celiac wheat sensitivity," or NCWS, some have called it — that has yet to be formally described by medical researchers.

The new Columbia study strongly suggests that NCWS is a real condition. "The people who complained of celiac-like symptoms had several types of immune markers in their blood that you don't see in celiac patients," says Armin Alaedini, an assistant professor of medicine at Columbia University Medical Center and the paper's senior author. These patients, he says, also reported slightly different symptoms than are typical in celiac disease, such as the sudden onset of nausea and diarrhea. Many of them said that within a few hours of eating wheat they would also experience mood swings, depression, anxiety, or mental fogginess — symptoms that are much less common among celiac patients.

The researchers are now planning follow-up studies to fully understand the causes of NCWS and to develop diagnostic tests.

"Figuring out a way to identify people with this condition is crucial," says Peter H. R. Green, a gastroenterologist who directs Columbia's Celiac Disease Center and is a coauthor of the new paper. "Too often, people with non-celiac wheat sensitivity are told by doctors that they're hypochondriacs, or else they are misdiagnosed with conditions like irritable-bowel syndrome or Crohn's disease. If we can develop a comprehensive test for wheat intolerance, people will finally be able to get the right treatment."

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