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**Persistent villous atrophy predicts development of complications and mortality in adult patients with coeliac disease - Schiepatti A, Maimaris S, Raju S et al.**

Schiepatti A, Maimaris S, Raju S et al. [*Persistent villous atrophy predicts development of complications and mortality in adult patients with coeliac disease: a multicentre longitudinal cohort study and development of a score to identify high-risk patients.*](https://gut.bmj.com/content/72/11/2095) Gut 2023; 72(11): 2095-2102. doi: 10.1136/gutjnl-2023-329751.

Coeliac disease (CD) is an autoimmune enteropathy with adverse reaction to gluten consumption, in susceptible individuals. Although, it’s well known that persistent villous atrophy can occur even when following a gluten-free diet (GFD), the risk factors, specific implications and outcomes of this phenomenon are not clearly known. This multicentric study investigates the risk factors and outcomes of persistent villous atrophy (pVA).

Over a 20-year period, pVA was found in 23% of patients, with 40% being asymptomatic. Factors such as age at diagnosis (>45 years), classical CD presentation, lack of clinical response, and poor adherence to a gluten-free diet were associated with pVA. pVA was significantly associated with poorer outcomes including development of complications (refractory CD being the most common) and mortality. The study also established a 5-point scoring system (Age at diagnosis > 45 (1 point), classical presentation (1 point), no clinical response (1 point), poor GFD adherence (2 points)) for predicting pVA, which proved effective in a validation cohort, as well.  A score of ≥ 3 was deemed appropriate for identifying at risk individuals.

This research conclusively shows that persistent villous atrophy (pVA) is linked to adverse outcomes in coeliac disease (CD). It is imperative to identify patients at risk for pVA and provide them with a follow-up duodenal biopsy. This early detection and treatment can help mitigate complications. The most common cause of pVA in CD is still poor adherence to a GFD, rather than the development of complications. Therefore, it is crucial to emphasize the importance of strict adherence to GFD to patients.