



Incidental Diagnosis of Epatite Autoimmune in Young Man with Celiac Disease

Ferdy Junior Gatti*

University of Salerno, Italy

*Corresponding Author: Ferdy Junior Gatti, University of Salerno, Italy.

Received: March 12, 2025

Published: July 27, 2025

© All rights are reserved by Ferdy Junior Gatti.

Abstract

A 24-year-old man experienced nausea, jaundice, and weight loss, leading to elevated serum transaminases. After several tests, he was diagnosed with celiac disease and started on a gluten-free diet. However, liver biopsy revealed moderately active autoimmune hepatitis. He began treatment with prednisone, resulting in significant improvement in liver enzyme levels. This case illustrates the challenges of diagnosing autoimmune hepatitis in young patients with mild transaminase elevations and underscores the importance of considering autoimmune causes. The patient continues under follow-up care.

Keywords: Jaundice, Hepatitis, Celiac Disease

Background and Aims

- The diagnosis of autoimmune hepatitis is often very complicated. Missed diagnoses still represent a portion of the pathology, especially in the initial phase. Failure to make an initial diagnosis can have serious consequences in the patient's prognosis, leading to cirrhosis or death due to liver failure.
- We are talking about a pathology with an incidence of 1 in 100,000 per year, with a greater prevalence in females.
- No sign or symptoms, negative serology and often serum transaminase confuse the diagnosis.
- We present a single case of a small elevation of transaminases which led to a diagnosis of asymptomatic celiac disease, but which was a sign of something else.

Materials and Methods

- 24-year-old man with an episode of nausea, anorexia and loss of 4-5 kg in a week, which resolved spontaneously without drugs. During the episode had hyperchromic urine, yellowing of skin and eyes. After 1 month small increase of serum transaminases x 1.5. Regular bowel function. No clinical signs.
- US regular. Anti-HbsAg and HCV-Ab negative.
- After another month he had highly increase of serum transaminases with AST x 27 and ALT x50 GGT x3, Total bilirubin 2.85. Negative ANA, AMA, LKM, IgA anti TTG, anti EBV, anti CMV, alpha1 anti trypsin slight increase. He performed a new serum analysis with increase of anti-TTG IgA.
- He subsequently performed genetics for celiac disease and confirmed homozygous DQ2.
- Performs EGDS for suspected celiac disease which documents nodularity in bulb and DII scalloping. Histological examination shows Marsh 3B.
- After 150 g gluten daily intake had IgA anti TTG x 4.
- A diagnosis of celiac disease is made and he started GFD with serum transaminases x 2.
- After 2 months with good adherence to GFD has AST x20 and ALT x 50. He denies alcohol abuse.
- Negative hemochromatosis mutations. Stable weight, Regular bowel function.
- We perform liver biopsy. The histological examination documents Histological Activity index acc. Knodell modified by Ishak: 7 Grading.

Results

- Diagnosis is moderately active chronic autoimmune hepatitis.
- Therapy is started with prednisone 40 mg daily. With AST x10 and ALT x 20.
- After 15 days of therapy AST x 5 and ALT x9, therefore values halving and normal bilirubin.
- Currently under follow-up in our Hospital [1-6].

Conclusions

Although the history is still unknown and the histological exam is compatible but not certain, the good response to steroid therapy is a positive factor that proves the correctness of the diagnosis.

This diagnostic difficulty leads us to always evaluate the autoimmune cause in a young patient without risk factors with a small increase in transaminases.

Bibliography

1. Taofic Mounajjed. "The Liver in Celiac Disease". *American Journal of Clinical Pathology* (2011).
2. Paolo Muratori. "Autoimmune liver disease and concomitant extrahepatic autoimmune disease". *European Journal of Gastroenterology and Hepatology* (2015).
3. Jaimy Villavicencio Kim. "Celiac Disease and Elevated Liver Enzymes: A Review". *Journal of clinical and translational hepatology* (2020).
4. Danilo Villalta. "High prevalence of celiac disease in autoimmune hepatitis detected by anti-tissue transglutaminase autoantibodies". *Journal of Clinical Laboratory Analysis* (2005).
5. Alberto Rubio-Tapia. "Celiac disease autoantibodies in severe autoimmune liver disease and the effect of liver transplantation". *Liver International : Official Journal of the International Association for the Study of the Liver* (2008).
6. Georgiana-Diana Cazac. "Celiac Disease, Gluten-Free Diet and Metabolic Dysfunction-Associated Steatotic Liver Disease". *Nutrients* (2024).