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A quantitative and qualitative review of a multidisciplinary clinic for adults with Coeliac Disease

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Management guidelines for the care of adults with coeliac disease (British Society of Gastroenterology 2010⁽¹⁾ and Clinical Resource Efficiency Support Team 2006⁽²⁾) recommend patients should be seen by a dietitian at diagnosis. Regular dietetic intervention improves dietary compliance⁽³⁾ and a multidisciplinary team (MDT) approach is favoured⁽⁴⁾. Historically, in Southampton University Hospitals NHS Trust, patients were initially seen by a Gastroenterology Consultant. Inequity in access to dietetic and specialist nurse services generated waits of up to 6 months. A coeliac service review in 2009 aimed to address the above service inadequacies by creating a MDT Gastroenterology Nurse Specialist and dietitian clinic for newly diagnosed coeliac patients. Referral criteria were adopted, with agreement amongst the Gastroenterology team for the clinic to run independently of direct Gastroenterology Consultant and outpatient nurse assistant and receptionist support. The aim of this study was to evaluate patient satisfaction and cost effectiveness of a highly specialised MDT clinic.

Commencing August 2010 a structured, retrospective, 10 question survey, created using Survey Monkey[®], was posted to patients attending the MDT clinic between January 2009 and June 2011 (n = 118). The anonymous survey enquired about pre and post clinic experience using a Likert item. Cost savings post-introduction of the MDT clinic were calculated.

Response rate was 61% (74/120) and 39% (29/74) provided general comments on their experience. Wait from diagnosis to clinic attendance was on average 8 weeks.

Satisfaction responses (n = 74)	Strongly Agree / Agree (%)	Neutral (%)
Joint Specialist clinic reduced hospital visits for coeliac disease	90	9
Specialist Nurse and Dietitian approachable & gave time for questions	99	1
Detailed information given on coeliac disease and its management	94	6
Left appointment feeling knowledgeable	94	5
Clinic offers means of accepting diagnosis and improving dietary compliance	87	13
Clinic offers timely and informative advice to manage coeliac disease	94	6

From January 2009 to June 2011, this MDT service has saved £11,668.20 in nursing, administration support and saved appointments. In addition, 30 Consultant Programmed Activities have been saved.

The MDT clinic has proven to provide a timely method of reviewing those patients newly diagnosed with coeliac disease, reducing outpatient waiting times. Its establishment has made monetary savings across the health care setting. Importantly, the collaborative working of two specialised health care professionals has provided a high quality service, as evaluated by the patients themselves.

1. British Society of Gastroenterology. *The management of Adults with Coeliac Disease*. http://www.bsg.org.uk/images/stories/clinical/bsg_coeliac_10.pdf (accessed 29 June 2011).
2. Clinical Resource Efficiency Support Team. *Guidelines for the diagnosis and management of Coeliac Disease in adults*. http://www.coeliac.org.uk/sites/files/coeliac/CREST_NI_2006_Guidelines_for_the_diagnosis_and_management_of_CD_in_adults.pdf (accessed 29 June 2011).
3. Pietzak MM (2005) Follow-up of patients with coeliac disease: Achieving compliance with treatment. *Gastroenterology* **128**, Suppl. 1, S135–S141.
4. British Society of Gastroenterology. *Care of patients with gastrointestinal disorders in the United Kingdom*. http://www.bsg.org.uk/images/stories/clinical/strategy06_final.pdf (accessed 29 June 2011).