

## **Economic Plan**

This document identifies the areas prioritised for economic modelling. The final analysis may differ from those described below. The rationale for any differences will be explained in the guideline.

## 1 Guideline

Coeliac disease: recognition, assessment and management of coeliac disease (Short title: Coeliac disease)

## 2 List of Modelling Questions

1b) Should active case-finding be implemented in people with existing conditions or specific subgroups that are associated an increased risk of coeliac disease?  It separate populations: first-degree relatives of people with liac disease, people with type 1 diabetes, people with pimmune thyroid disease and people with irritable bowel drome  case-finding
liac disease, people with type 1 diabetes, people with pimmune thyroid disease and people with irritable bowel drome
case-finding
g
se-finding using a variety of serological and/or genotypic gnostic assays, used individually or as part of a sequential orithm
A
1d) Which serological test is the most appropriate to diagnose liac disease? Depending on test results, should more than 1 be used and, if so, what should be the sequence of testing? owing which sequence of tests and test results is it appropriate efer onwards for endoscopic intestinal biopsy?
pple with signs and symptoms suggestive of coeliac disease
ange of serological and/or genotypic diagnostic assays, used vidually or as part of a sequential algorithm
4

Clinical questions by scope area	4.5.2i) What monitoring strategy should be in place for people with coeliac disease?
Population	People with coeliac disease
Interventions considered for inclusion	Dietitian-led follow-up versus standard care
Type of analysis	Exploratory CUA