Example of FCD Clinic focusing on Gastroenterology

Mariana Costenla, Trafford West PCN

Primary Care Dietitians

First Contact Clinic

- 1 afternoon per week– Primrose Surgery
- Booked only by GP/ Nurse who triageAskMyGp queries
- Conditions
  - Weight management
  - Bloods/ info or queries about exams
  - Gastro presentations – constipation, bloating, diarrhoea, altered bowel habits

Main considerations of First Contact

- Shift from the dietetic mindset
- Holistic approach
  - Clinical – history taking, examination, test requests
  - Lifestyle medicine

  - Safety netting
- Make every contact count
  - BP, smears, smoking status, alcohol intake, reviews, appointments up to date?
  - Onward referrals

Case study 1

- Female, 85
- Presentation – diarrhoea, TATT, decrease appetite
- Clinical History - Diverticulosis 2022, breast ca, abdominoplasty, HTN, Hyperparathyroidism
- Notes - seen same month for same reason, had some falls, also seen January and March for same reasons
- January - Calprotectin 457, down to 277 March considered likely viral, negative FIT
- July - microbiology nil
- Having bloods taken same day HbA1c, LFT, CRP, folate, CA125, TFT, B12, FBC
- Diet hx
  - B- Weetabix or Fruit &Fibre SS milk
  - L- light meal or snack
  - D- hot meal – meat potatoes and vegetables
  - Tea/ coffee SS milk, no sugar, water

Case study 1

- Findings
  - Calprotectin 912 µg/ g
  - Fit 27 µg Hb/ g
  - TTG negative
  - Low folate
- GP – 2WW colorectal referral
  - Colonoscopy – biopsies, ulcerated oedematous and haemorrhagic mucosa
- Differential diagnosis – IBD (just differential because no official diagnose been given)
  - Management – diet

Case study 2

- Female, 33
- Presentation – diarrhoea for 2.5 weeks, abdominal cramps
- Medical hx – eczema, asthma, anxiety and depression, IDA
- BMI> 30kg/m2
- TTG 2018 neg
- Family hx – cousin UC

Case study 2

- All bloods unremarkable, TTG, FIT and calprotectin negative
- Transferrin and ferritin a little low– for telephone call with GP, agreed not for oral Fe and no further ix

- Differential diagnosis – IBS
- Rv – diarrhoea resolved, sx improved, for PIFU

Case study 3

- Female, 29
- Presentation – 10 days ago diarrhoea and vomiting, diarrhoea since then
- No fever, no loss of appetite, no weight loss, continues daily activities, no blood in stools, no temperature, looking well and fit
- Works as cabin crew
- Before sx – flight with girl vomiting
- Note – daughter started vomiting yesterday

Case study 3

- Differential diagnosis - likely viral gastroenteritis

- Plan
  - Bland and healthy diet
  - Watch and wait approach
  - Safety net

- If no improvement, then for further ax