encouraging families to consider a biopsy in asymptomatic patients. However, there are many occasions when serological tests have been omitted by clinicians, probably due to a lack of awareness. Improvements are needed to reduce the length of time from diagnosis to dietician follow up, and follow up at 12 months needs to include repeat tTG assessment. Finally, increased awareness is needed on the national policy to transition celiac patients to adult secondary care.

Aims Bioelectric impedance analysis (BIA) is a widely used, simple bedside technique, but clinical use is limited by the need to convert raw measurements to body composition, using equations that are potentially inappropriate. The use of the raw bioelectric impedance vectors (BIV), resistance (R), reactance (Xc) and phase angle (PA) – suggested to indicate body fluid, cell mass and cell health respectively – may be an alternative for monitoring disease progression/treatment. However, clinical experience of BIV in children is limited and previous studies have not standardised for age. We investigated predictors of BIV and their ability to predict clinical outcomes in children with acute fluid shifts and using disease-specific outcomes, may help to better define the clinical role of BIV.

Method Data for 69 infants born <32 weeks gestation was collected using a specific proforma from August 2010 to October 2012, by a Speech and Language Therapist at development in our cohort no increase in feeding related problems or aversions was identified in those weaned at 4–6 months CGA. We feel this supports our current weaning advice and highlights the importance of our Developmental Care programme. We acknowledge sample size is small and recognise that larger prospective data collection with a broader range of feeding related outcomes is required.

Conclusion In our cohort no increase in feeding related problems or aversions was identified in those weaned at 4–6 months CGA. We feel this supports our current weaning advice and highlights the importance of our Developmental Care programme. We acknowledge sample size is small and recognise that larger prospective data collection with a broader range of feeding related outcomes is required.