Results 135 subjects showed insulin resistance, with higher TyG index than those with normal insulin sensitivity (P < 0.001) and higher Triglycerides/HDL ratio (P < 0.001) (Table).

In all the studied population a positive association between TyG index, HOMA index and Triglycerides/HDL ratio was found (P < 0.001); in the non-insulin resistance group a positive association between TyG index and waist/height ratio was observed (p = 0.03).

Conclusions TyG index is a good predictor of decreased insulin sensitivity also in paediatric ages and might be considered also as a marker of cardiovascular risk considering the association with waist/height ratio and Triglycerides/HDL ratio.

PO-0145 Celiac disease – the experience of a single centre in 29 years

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Aims The study aimed to evaluate the epidemiological and clinical profile of the patients diagnosed with celiac disease in ‘Grigore Alexandrescu’ Children’s Hospital over a 29 years period.

Methods We performed a retrospective study including 224 patients diagnosed with celiac disease, from January 1985 until December 2013. Three groups resulted. The first group included patients diagnosed from 1985 until 1995, before celiac serology was available, the second group patients diagnosed from 1996 until 2006 using qualitative antitissue-transglutaminase antibodies and the third group patients diagnosed from 2007 until 2013 using quantitative antitissue-transglutaminase antibodies and HLA DQ2/DQ8 typing. From the medical records we extracted parameters, using the Egyptian growth reference data.

Results The mean age at diagnosis was 12.1 years. Sex ratio was male/female = 2.1/1. Eight patients had family history of WD. The frequency of clinical signs was: hepatomegaly (47.8%), ascites (22%), jaundice (22%), splenomegaly (22%), esophageal varices (15%). Neurological manifestations were encountered in 4 cases. Children aged 10–14 years presented the largest number of clinical and laboratory abnormal findings. Urinary excretion of cooper was increased in 22 patients. Elevated transaminses was a common finding. Serum ceruloplasmin was low in 74%. Haematological abnormalities were: thrombocytopenia (26%), leucopenia (4%). Hepatic steatosis was found in 56%, fibrosis in 18% and signs of portal hypertension in 11%. Liver biopsy was performed in 8 cases, 6 presenting vascular lesions. Genetic testing was performed in 6 patients, 4 had heterozygote exon 8 mutation.

Conclusions WD is sometimes difficult to diagnose. Symptoms are more frequent in elder children and are dominated by liver disease with moderate cytolysis syndrome without liver failure; rarely neurological signs are associated. Family screening is extremely useful and allows precocious diagnosis in asymptomatic patients with early therapy initiation.