Eosinophilic esophagitis (**EoE**)



What is eosinophilic esophagitis (EoE)?

Eosinophilic esophagitis (EoE):

- Is a chronic allergy condition that causes swelling (also called inflammation or edema) of the esophagus. The esophagus is the tube that carries food and liquids from the mouth to the stomach.
- Causes the lining of the esophagus to get thicker. This can lead to new rings in the esophagus and can cause the esophagus to narrow or get smaller. This narrowing is also called "esophageal stricture."

EoE was first seen in 1995. It affects about 4 out of 10,000 children in the United States. It is seen in both children and adults across the world. People with EoE may be diagnosed at any age.

What is an eosinophil?

An eosinophil is a type of white blood cell. The number of these cells is higher in many conditions, such as eosinophilic disorders and allergies.

- It is normal to have some of these cells in your stomach or large intestine (colon).
- It is not normal to have these cells in the esophagus. When this happens, the doctor will look for the causes of the eosinophils.

Normal eosinophil values, per high power field (hpf): Esophagus (0) Gastric antrum (2-10) Duodenum (10-20) Colon (15-30) Average accepted values

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What are the possible symptoms?

Your child may have one or more of these:

- Has nausea (feels like throwing up)
- Does not grow as they should or loses weight
- Has reflux
- Has trouble swallowing or gets food stuck in the esophagus
- Gets bloated
- Does not get the nutrition they need
- Throws up (vomiting)Has belly or chest pain
- Does not want to eat or drink like normal
- Has trouble sleeping

In case of an urgent concern or emergency, call 911 or go to the nearest emergency department right away.

Eosinophilic esophagitis (EoE), continued

Who gets EoE?

EOE is more common for:

- Those with other allergies, eczema or asthma. (Two out of 3 patients have other allergic diseases.)
- Those with a family history of allergies, asthma or EOE.
- Boys and men.

What tests could my child have?

Your child may have 1 or more of these tests:

Endoscopy (EGD)

- An EGD is a test that helps the gastroenterologist (GI doctor) to see the lining of the esophagus, stomach and duodenum (the start of the small intestine).
- Your child's doctor will use a special tool called an endoscope or "scope." A scope is a long, flexible tube with a camera and light. The size around the tube is about the size of your child's thumb.
- The test helps to see ulcers or other problems that might be causing your child's symptoms. The
 doctor will take small samples of tissue, called biopsies, from areas seen during the scope.
- The most common issues after the test are burping or sore throat.

Allergy testing

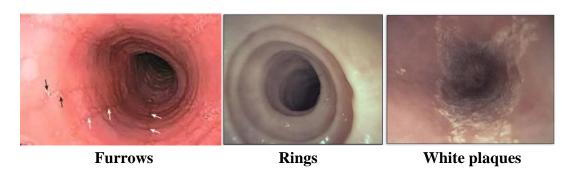
- Often your child will be tested for food or environmental allergens, such as pollen, dust and pet dander. These allergens may worsen EoE symptoms.
- Standard allergy tests, such as skin prick tests or blood tests. These can help see allergic reactions right away.
- Other allergy testing called patch testing. This can help show allergic reactions over time.

Normal esophagus (as seen with a scope)



Eosinophilic esophagitis (EoE), continued

Esophagus with EoE (as seen with a scope)



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What is the treatment?

Most often, treatment includes medicines and diet changes. Your child's treatment is based on their needs. The doctor and your family will decide on the best treatment. Your child will need more endoscopies over time to make sure treatments are working or if your child starts having new symptoms.

Medicines

- This includes proton pump inhibitors (PPI) and topical corticosteroids, such as fluticasone and budesonide. Patients swallow these medicines every day to help coat the esophagus. They work to decrease the eosinophils in the esophagus.
- Experts are looking at other medicines that may help EoE.

Diet changes

- There are many diet changes used to treat EoE. A doctor and nutritionist (also called a dietician) will talk with you and help you with any diet changes.
- If your child has a food allergy, they should not eat that food. Foods that most often lead to EoE are cow's milk, wheat and eggs. In many cases, EoE patients are allergic to 3 foods.
- Some EoE patients who have very bad symptoms may need to start drinking a special formula.
 Some special formulas include Elecare, Neocate, EO28 splash and Neocate Jr. Some patients even need to get a feeding tube (or G-tube) so that they can get the right formula.

Who will provide follow-up care for my child?

Your child's care team may include GI doctors, allergy/immunology doctors and a nutritionist who specializes in EoE and food allergies. You may call 404-785-KIDS (or 404-785-5437) for more details.

When should I call the doctor?

Call the doctor if your child has:

- Vomiting that lasts more than 2 days
- Weight loss or major change in their eating or drinking

In case of an urgent concern or emergency, call 911 or go to the nearest emergency department right away.

Eosinophilic esophagitis (EoE), continued

Also call if you have any questions or concerns about how your child looks or feels.

Call the doctor **right away** if your child has any of these:

- Trouble breathing
- Chest pain
- Fever of 101°F or higher
- Severe stomach pain
- More than 1 teaspoon (tsp) of bleeding after a colonoscopy
- Food stuck in their throat that they cannot swallow
 - This is different from choking. When a person is choking, they may turn blue and cannot cough. If this happens, call 911 right away.

Where can I learn more?

For more details, you may visit these websites:

- APFED.org
- gikids.org
- eoscoalition.org
- curedfoundation.org
- http://community.kidswithfoodallergies.org/pages/community

Children's Healthcare of Atlanta has not reviewed all of the sites listed as resources and does not make any representations regarding their content or accuracy. Children's Healthcare of Atlanta does not recommend or endorse any particular products, services or the content or use of any third party websites, or make any determination that such products, services or websites are necessary or appropriate for you or for the use in rendering care to patients. Children's Healthcare of Atlanta is not responsible for the content of any of the above-referenced sites or any sites linked to these Sites. Use of the links provided on this or other sites is at your sole risk.

This teaching sheet contains general information only. Talk with your child's doctor or a member of your child's healthcare team about specific care of your child.