

Eosinophilic Esophagitis

What is Eosinophilic Esophagitis (E.E.)?

Eosinophilic esophagitis is one of many types of esophagitis. It is not as common as reflux esophagitis, but has many of the same symptoms. It is caused by an abnormal accumulation of eosinophils in the lining of the esophagus (swallowing tube). Eosinophils are a type of blood cell that can be seen in the esophagus. In this condition however they are present at an increased level. The reason for this increased accumulation is unknown. Often individuals with Eosinophilic esophagitis have allergies or an allergic disorder (i.e. asthma, allergic rhinitis, urticaria, etc.)

Symptoms often include heartburn and more commonly difficulty in swallowing, or the feeling that food is getting caught or stuck in the esophagus (swallowing tube).

How do you know if you have Eosinophilic Esophagitis?

The only way to diagnose Eosinophilic Esophagitis is by Upper Endoscopy with biopsies (tissue samples) of the esophagus. Upper Endoscopy or EGD (Esophagogastro-duodenoscopy) is a procedure where a small lighted tube is passed through your mouth into your esophagus, stomach and first portion of your small intestine. The tube that is used has a camera within it and is connected to a computer. This test allows the doctor to see the lining of your esophagus, stomach and first portion of your small intestine. Pictures can be taken and can be part of your medical record. Biopsies can be taken at the time of endoscopy. There is no pain associated with taking biopsies.

Findings at the time of endoscopy can show a normal appearing esophagus, or an esophagus that appears to have many rings (somewhat like a spring). Biopsies show an increase in the amount of eosinophils that are present.

How is Eosinophilic Esophagitis treated?

Once the diagnosis is made, doctors generally recommend strict avoidance of problem foods. Some of the foods most commonly associated with eosinophilic esophagitis include milk, soy, eggs, nuts, shellfish, beef, peas, tomatoes, rye, wheat and fish. Determining which foods to avoid can be difficult. Patients may be allergic to one food or to many. In some cases, symptoms appear only when a certain amount of the food is consumed. To accurately pinpoint the offending foods, patients may need to start with a severely restricted diet. Then as foods are slowly introduced (one by one), families watch for the appearance of symptoms. Once the problem foods are eliminated, the disease should slowly resolve. Typically, Proton pump inhibitors are also given to patients with Eosinophilic Esophagitis. Proton pump inhibitors, [pantoprazole](#) (Protonix), [esomeprazole](#) (Nexium), [rabeprazole](#) (Aciphex), [lansoprazole](#) (Prevacid), and [omeprazole](#) (Prilosec, Zegerid) reduce production of acid by the stomach. They are very safe and effective

treatment for the symptoms of acid reflux and esophagitis. Since acid reflux may aggravate esophagitis in some patients with eosinophilic esophagitis, doctors frequently use proton pump inhibitors for treating eosinophilic esophagitis.

Are there any complications to Eosinophilic Esophagitis?

The most common complication is food becoming caught in the esophagus. This can lead to erosions (irritation) or ulcerations on the wall of the esophagus.

What kind of follow up will I need?

Routine follow up is not required. If you continue to have problems after avoidance of the problem foods call your gastroenterologist.