



Eosinophilic Esophagitis (EoE)

What is eosinophilic esophagitis (EoE)?

This is a chronic allergic or immune inflammatory condition of the esophagus in which there are an abnormal number of eosinophils infiltrating the lining of the esophagus.

What are eosinophils and why do they cause inflammation of the esophagus?

Eosinophils are a type of white blood cell that evolved to help humans fight off parasitic infections. They are also one of the primary cells involved in allergic inflammation. Eosinophils release substances into the surrounding tissues with the intention of killing off parasites. However, the chemicals they release can also damage the surrounding tissue. With allergic conditions, in which there is an excess of eosinophils in the tissue, there is “inflammation” which can elicit symptoms.

What are examples of conditions with eosinophilic inflammation?

- Allergic Rhinoconjunctivitis – such as hay fever, dust mite allergy, pet dander allergy.
- Asthma
- Atopic Dermatitis
- Eosinophilic Esophagitis

What are the symptoms of EoE?

The symptoms vary based on how long the condition has been present. Therefore, the symptoms can differ between children and adults.

Children:

- Difficulty feeding (especially infants and toddlers)
- Gastroesophageal reflux
- Difficulty swallowing
- Vomiting

- Abdominal pain
- Food impaction (when one cannot fully swallow food – the food becomes “stuck” in the esophagus.)

Adults:

- Gastroesophageal reflux that does not respond to medications
- Chest pain
- Upper abdominal pain
- Food impaction

What causes EoE?

- It occurs secondary to an immune response to either a food or environmental protein or allergen. Not all cases are from a true food allergy, in fact only about 40% of cases involve a true food allergy.
- It is not certain as to why some individuals develop eosinophilic esophagitis but there does appear to be a genetic component.
- The foods that are most commonly associated with the diagnosis of eosinophilic esophagitis include cow’s milk, eggs, wheat, soy, peanuts, tree nuts, fish and shellfish.
- Eosinophilic esophagitis can also be associated with environmental allergies such as dust mites, pet dander, mold spores and pollens.

How do you diagnose EoE?

- Clinical history
- Endoscopy
- Allergy testing

What are the treatments for EoE?

- *Antacids*
 - Such as an H2-Blocker (i.e famotidine) or a Proton Pump Inhibitor (i.e omeprazole)
- *Inhaled or Nebulized steroids*
 - These medicines are swallowed rather than inhaled in order to coat the surface of the esophagus.
- *Food directed elimination diet.*
 - Foods are eliminated from one’s diet based on positive allergy skin testing and/or laboratory allergy testing.
- *Empiric elimination diet.*
 - If the allergy evaluation is negative, strict elimination of one or more of the most common food triggers is suggested. These foods include: cow’s milk, eggs, wheat, soy, peanuts, tree nuts, fish and shellfish.
- *Elemental or Amino Acid Based Diet.*
 - This recommendation is only reserved for the most severe cases in which patients eliminate all foods from their diet and obtain their nutrition from a hypoallergenic amino acid-based formula.
- *Allergen Immunotherapy (Allergy Shots).*
 - This is considered for patients who appear to have an environmental trigger leading to Eosinophilic Esophagitis.

If you have any questions about Eosinophilic Esophagitis, please call our office or schedule an appointment online.

Riverdale office: 973-248-9199
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