

Eosinophilic Disorders Explained



ausEE

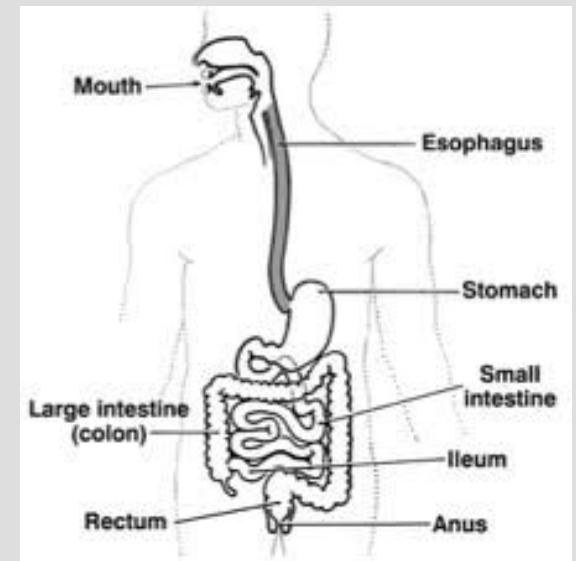
Quick glance



- Eosinophilic gastrointestinal disorders (EGIDs) are relatively new but their incidence is rising.
- EGIDs have no cure, but treatment is available.
- Generally children are diagnosed; however, the adult incidence is on the rise.
- Males are more commonly affected than females.
- Eosinophilic oEsophagitis (EoE) is the most common EGID.
- EGIDs can be painful, and difficult to diagnose.
- Ongoing management is required.
- ausEE provides free information and support for those affected.

What is an oesophagus and what does it do?

- The **oesophagus*** is the organ that connects the mouth to the stomach.
- It is the way we get our food from our mouths to our stomachs.
- Think of it as a ‘transporter of food’.



*In North America the spelling is ‘esophagus’.

What is an eosinophil?



- An **eosinophil** is a type of white blood cell that helps the body fight off certain infections and parasites.
- Normally eosinophils do good things.



Eosinophils in the oesophagus



- Sometimes the eosinophils think that **food*** is a foreign invader (like a parasite) and they **attack!**
- This can make you and your oesophagus feel very sick.
- It can cause inflammation, irritation, nausea, food impactions, vomiting, stomach pains and a general feeling of being unwell.
- Sometimes it can make you not want to eat anything at all.

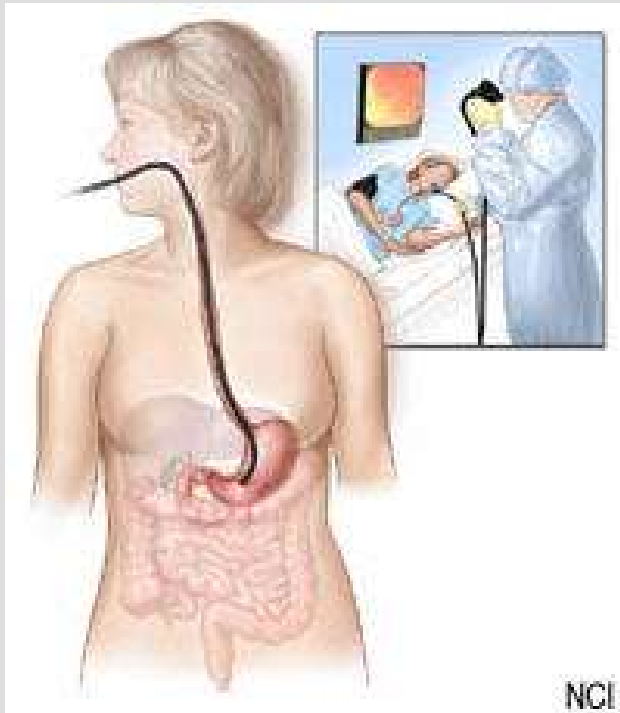


*EoE can also be triggered by aero-allergens such as grass, dust or pollen.

How do I know if I have EoE?



- The only way to check whether eosinophils are present in the oesophagus is to perform an endoscopy and take multiple biopsies of the oesophagus.

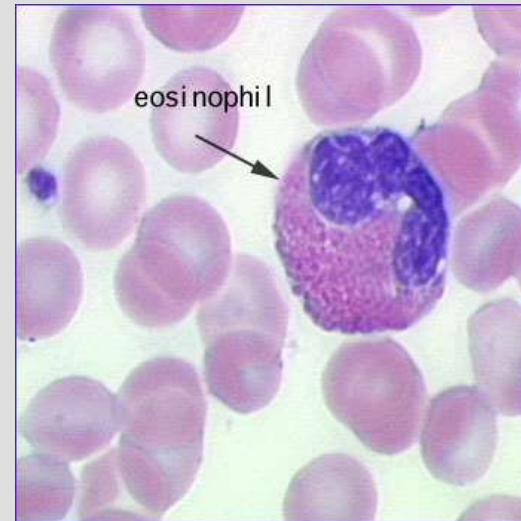


- An **endoscopy** is when a gastroenterologist places a narrow tube with a camera down the patient's oesophagus. A **biopsy** is when a very small sample of tissue is taken.
- The gastroenterologist will note how the oesophagus looks, as there may be furrowing (lines or ridges from damage).
- Most of the time, an endoscopy is performed as day surgery. The invasiveness of an endoscopy is especially challenging for children.

The diagnosis



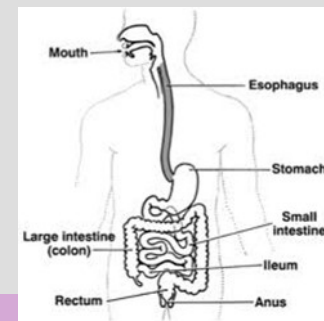
- Once the biopsies are taken, a pathologist reviews them under a microscope to see whether there are any eosinophils. Generally, if more than 15 per high-power field are found, active EoE is diagnosed.



Eosinophilic gastrointestinal disorders (EGIDs)



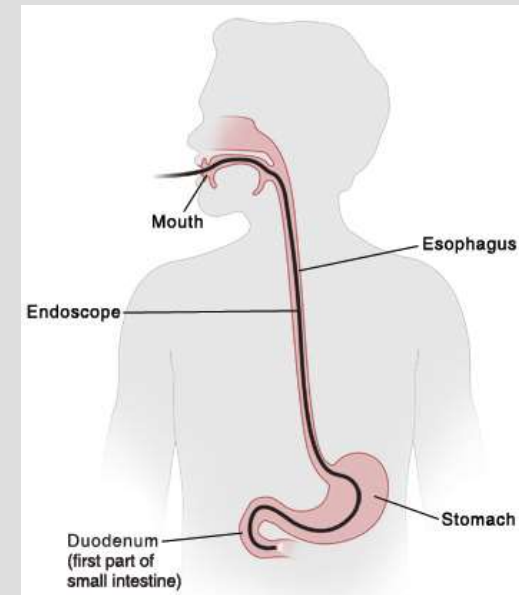
- Although EoE is the most diagnosed EGID, other parts of the body can also be affected:
 - **Eosinophilic gastritis:** high numbers of eosinophils in the stomach
 - **Eosinophilic duodenitis:** high numbers of eosinophils in the duodenum
 - **Eosinophilic enteritis:** high numbers of eosinophils in the small intestine
 - **Eosinophilic colitis:** high numbers of eosinophils in the large intestine
 - **Eosinophilic gastroenteritis:** affects the stomach and small intestine.



PPI-REE diagnosis



- Proton-pump inhibitor-responsive oesophageal eosinophilia (PPI-REE or PPI-ROE) is a newly recognized entity that must be differentiated from EoE.
- PPI-REE refers to patients with esophageal eosinophilia on biopsy who respond to a course of PPI therapy.



I've been diagnosed with an EGID. What now?



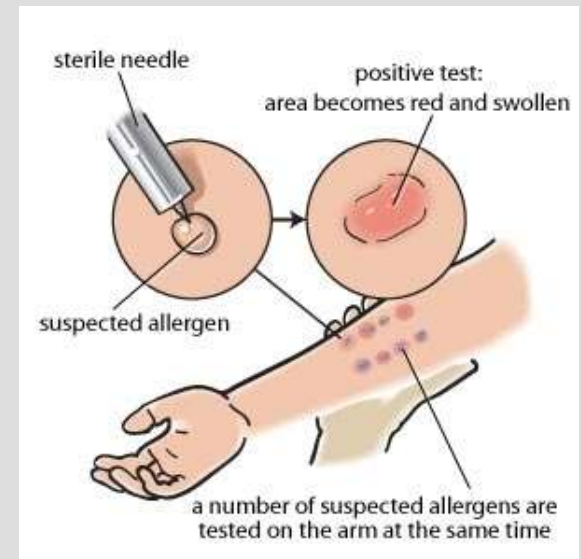
- Being diagnosed can be the end of a very long journey and **the beginning of a new one**.
- It is very important that you work with your gastroenterologist, allergist and/or dietitian to find the **best treatment plan for you** or your child.
- **No two cases are the same** and there may be a time of trial and error before you find what works best for you or your child to relieve symptoms.
- There will probably be some tests to determine if there is an allergic component.
- Once a treatment plan is in place, ongoing review is essential.
- It is just as important to receive adequate **support** through groups such as ausEE and your family and friends.



Allergy Testing



- Some physicians may decide to send you or your child to an allergist.
- They may perform tests such as:
 - Skin Prick Testing (SPT)
 - Atopy patch testing
 - RAST blood testing
- These tests **may** indicate if there is an immediate or delayed allergy.
- In EGID patients it is not uncommon for allergy test results to be negative.

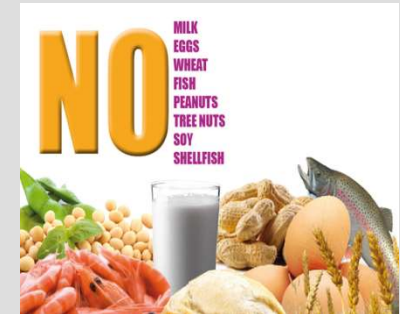


Skin Prick Testing

What are some common treatment plans?



- An **elimination diet*** is one treatment:
 - This may mean excluding the eight most allergenic foods, which are dairy, eggs, wheat, fish, peanuts, tree nuts, soy and shellfish.
 - Some treatment plans may eliminate less, some more. Each case is unique.
 - If you are not eating enough or not receiving enough nutrition from your food, you may be placed on an elemental formula. This is a safe and effective way to maintain nutrition in those who have difficulty tolerating many foods.
 - If a patient cannot tolerate any foods, an **elemental diet** may be required, which means eliminating all foods except for an elemental formula.



*It is very important that you work with a qualified dietitian before beginning any kind of elimination diet.

Other treatment options



- Some patients may be prescribed a corticosteroid medication. These are either sprays that are swallowed, or a liquid preparation typically mixed with an artificial sweetener to make a slurry that is swallowed.
 - Swallowing the medication ‘coats’ the oesophagus to help reduce the eosinophil count.
 - Unfortunately, this treatment does not work for everyone.
- Other drugs (such as reflux medication) may also be prescribed.



Nutrition and tube feeding



- It is crucial to have a qualified nutritionist or dietitian to monitor **adequate nutrition** levels.
- If those levels are not met, **tube feeding**, also called enteral nutrition, may be necessary. This is where food in liquid form is given through a tube into the stomach or small intestine.
- The most common tubes are:
 - a **nasogastric tube (NG)**, which is put up the nose and down into the stomach
 - a **gastrostomy**, sometimes called a PEG (percutaneous endoscopic gastrostomy), which is placed in the stomach during a surgical procedure. Some PEGs have a tube always hanging out and some replacement PEGs are flat ('profile' or 'buttons').



Living with an EGID



- It is important to remember that no two cases are the same. Each case will be treated differently.
- EGIDs are generally not life threatening; rather, they are life limiting and can create social challenges.
- This can affect many aspects of a family's life, so it is important to get support or give support where you can.
- Ongoing review with your medical team is important.



Online Support is Available



- We offer an online Facebook support forum that you can join here: www.facebook.com/groups/ausee
- We also have a group specifically for Adults diagnosed with an EGID and it can be joined at: www.facebook.com/groups/auseeadults
- The Official ausEE Group on Livewire can be joined by anyone aged between 10 to 20 who is living with an EGID: www.livewire.org.au



a charity dedicated to improving lives affected by eosinophilic disorders



**To find out more,
please visit our website
at www.ausee.org**



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