

Eosinophilic Esophagitis in (EoE)Children

Eosinophilic esophagitis (EoE) is an inflammatory condition in which the wall of the esophagus becomes filled with large numbers of white blood cells called eosinophils.

Because this condition inflames the esophagus, someone with EoE may experience difficulty swallowing, pain, nausea, regurgitation, and vomiting. Over time, the disease can cause the esophagus to narrow, which sometimes results in food becoming stuck, or impacted, within the esophagus, requiring emergency removal.

In young children, many of the symptoms of eosinophilic esophagitis resemble those of gastroesophageal reflux disease (GERD)—including feeding disorders and poor weight gain—so the child may be mistakenly diagnosed with GERD. However, proper diagnosis of esophagitis in children is important because it is a serious disease that can cause lifelong problems if undiagnosed.

Eosinophilic Esophagitis has only recently been identified as a disease, and many of its symptoms—particularly in children—mimic the symptoms of GERD.

Eosinophilic Esophagitis symptoms may include:

- Nausea
- Problems swallowing (dysphagia)
- Vomiting
- Stomach pain
- Chest pain
- Heartburn
- Loss of weight
- Food impaction

Patients of different ages tend to experience different symptoms:

In children, Eosinophilic Esophagitis symptoms are usually similar to those of GERD (abdominal pain, nausea, vomiting, poor weight gain)

Adolescents and adults frequently experience difficulty swallowing as well as food impaction

Diagnosing Eosinophilic Esophagitis:

If your doctor suspects that your child has Eosinophilic Esophagitis, he or she will conduct a biopsy of the esophagus. The biopsy is usually done with a procedure called endoscopy, in which a small camera is inserted into the esophagus. Sometimes, the doctor will see rings of eosinophils (white blood cells) in the esophagus— but often it will appear normal.

After the biopsy, the tissue will be inspected for evidence of eosinophils, If an EoE diagnosis is confirmed, the doctor will likely conduct allergy testing, looking for food and environmental allergies that contribute to the patient's EoE.

Treatment and Management

Treating Eosinophilic Esophagitis

The most effective treatment of Eosinophilic Esophagitis involves changes to the child's diet and nutrition. If your child is diagnosed with EoE, the doctor or medical team will work to identify which foods are causing the condition so that your child can avoid them.

The most common allergic foods include milk, eggs, nuts, beef, wheat, fish, shellfish, corn and soy, but many other foods may also be a factor in EoE.

Some children with EoE may be allergic to a single food, while others may be allergic to many foods.

Because allergy tests are often unable to determine which foods are causing you're your child may need to temporarily eliminate some or all normal foods from his or her diet, and gradually reintroduce them. If that's the case, your child may need to temporarily follow an elimination diet or an elemental diet:

Elimination Diet

This type of diet removes all foods that are known to cause an allergic reaction, as well as other foods that are suspected to cause problems. The remaining foods are monitored to ensure a balanced diet

Elemental Diet

This diet removes all sources of protein and introduces a formula made up of amino acids, fats, vitamins, minerals and sugar. Children are often placed on an elemental diet, while adults tend to supplement with other foods. In some cases tube feedings (enteral support) are necessary for growth and weight gain.

If your child improves after following an elimination or elemental diet for a few months, foods will slowly be reintroduced one at a time. Your doctor will monitor your child to make sure he or she can tolerate each food. It's possible that your doctor will need to perform another endoscopy with biopsy to determine whether your child is responding well to the reintroduced foods.

Medication Options

Currently, medication does not appear to be as effective as dietary changes in the treatment of Eosinophilic Esophagitis. Certain medications, such as pump inhibitors, oral and topical corticosteroids, and leukotriene inhibitors have been shown to have some helpful effects on patients with EoE, but dietary modifications are the primary course of treatment. The healthcare community is working to identify medications that may be used in the future to treat this condition.

Coping: Living with Eosinophilic Esophagitis

Coping with restricted diets can be difficult for anyone—especially a child. If your child seems to be having trouble dealing with the treatment of Eosinophilic Esophagitis, you can be a great source of comfort and help.

Keep the lines of communication open, and be sure to let your child know: It's normal to feel sad or anxious

Following the new diet will help you lead a normal, healthy life

It's important to talk about your feelings with a parent or a doctor

Anything you share with a doctor is confidential and private—he or she can't tell anyone else without your permission

Kids are different for all kinds of reasons—you're great the way you are!