EOSINOPHILIC ESOPHAGITIS: TREATMENT IN 2005.

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PURPOSE OF REVIEW: Eosinophilic esophagitis is an isolated, eosinophilic inflammation of the esophagus. The symptoms are often confused for those of gastroesophageal reflux. Over the past few years, there has been a significant increase in the literature surrounding eosinophilic esophagitis as more than two-thirds of the articles written on the subject have been published within the past 3 years. Because the incidence is rising and the condition is easily diagnosed by endoscopy with biopsy, it is important for physicians to understand the pathophysiology, clinical presentation, and treatment options available for patients. RECENT FINDINGS: The etiology of eosinophilic esophagitis in children is reported to be associated with an allergic response to food antigens. Because allergy tests are often unable to determine the causative foods, complete elimination of all foods is often required. The diagnosis requires a biopsy of the esophagus, stomach and duodenum. The condition is diagnosed if the patient's esophageal biopsy depicts over 20 eosinophils per high-powered field despite the use of aggressive acid blockade, biopsies of the stomach antrum and duodenum are normal, and the tissue inflammation resolves when dietary antigens are removed from the diet. While the most commonly involved foods causing eosinophilic esophagitis include milk, eggs, nuts, beef, wheat, fish, shellfish, corn and soy, almost all foods have been implicated. Alternative treatments include esophageal dilatation and medical therapy. SUMMARY: This article reviews the past year’s literature, concentrating on the pathophysiology, and treatment of eosinophilic esophagitis in both children and adults.

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