EOSINOPHILIC ESOPHAGITIS

**PHARMACOLOGIC MANAGEMENT**

Swallowed topical steroid

Dilation

Consider as adjunct for refractory strictures

**DIETARY MANAGEMENT** - Consult Registered Dietitian (RD)

Consider as a first-line option for all patients - may allow for prolonged, drug-free remission

Empiric (1-8 foods)

Test-directed - Consult Allergist

**Combination**

Elimination diet + supplement AAF

**Elemental Diet** (AAF)

**NEOCATE® PROVIDES THE MOST OPTIONS FOR YOUR PATIENTS**

Neocate®

Syneo® Infant

Neocate® Nutra

Neocate® Junior

Unflavored, Vanilla, Strawberry, Chocolate, Tropical

Neocate® Splash

Unflavored, Orange-Pineapple, Tropical, Fruit, Grape

- Not FDA approved for use in EoE.

- Neocate® Nutra is a hypoallergenic semi-solid food - not suitable as sole source of nutrition.

- Neocate® is a family of hypoallergenic, amino acid-based medical foods for use under medical supervision and is indicated for cow milk allergy, multiple food allergies and related GI and allergic conditions.

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- Neocate® Junior is an amino acid-based formula for infants 6 months and older.

- Neocate® Splash is an amino acid-based formula for children and adults.

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**MEETING NUTRIENT NEEDS?**

YES

NO

YES

NO

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Refer to RD

Supplement with AAF &/or micronutrients

Monitor diet efficacy and quality, growth, quality of life, feeding difficulties, and micronutrient status

Reintroduce 1 food/food group at a time as medically feasible/tolerated, or per local protocol - Consult Allergist

Monitor for:

- relapse/failure
- potential steroid side effects (adrenal insufficiency and esophageal candidiasis)

Periodically reassess readiness/ preference for dietary management as long-term solution

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EoE (EOSINOPHILIC ESOPHAGITIS)
A chronic, immune/antigen-mediated, esophageal disease characterized clinically by symptoms related to esophageal dysfunction and histologically by eosinophil-predominant inflammation

Dietary management can help identify the root cause of EoE and Neocate can help

Is your patient showing possible signs and symptoms of EoE? 

Do they share factors common among patients diagnosed with EoE?

MALE:
Two of every three patients diagnosed with EoE are male

UNUSUAL EATING BEHAVIORS:
Slow eating, lots of fluid with meals, and preference for pureed textures are seen in children

ATOPIC:
Asthma, allergic rhinitis, IgE-mediated food allergy, and atopic dermatitis are more common in EoE than the general population

AUTOIMMUNE CONDITIONS:
Celiac disease, inflammatory bowel disease, multiple sclerosis, rheumatoid arthritis and others have been associated with EoE

If you suspect EoE, refer to a gastroenterologist
Esophago-gastroduodenoscopy with biopsy

<15 eos/hpf = EoE unlikely
≥15 eos/hpf

Other causes of esophageal eosinophilia ruled out (GERD; non-EoE EGIDs; infection; connective tissue disorders, etc.)

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