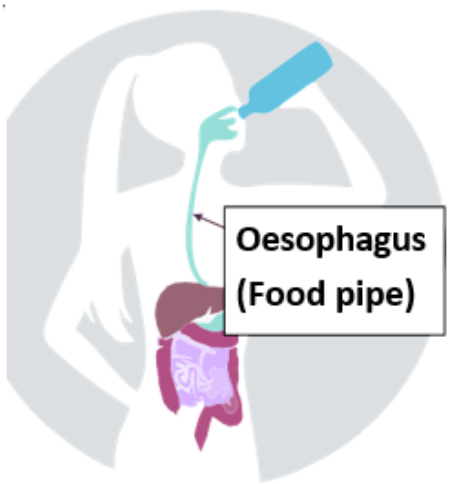
Eosinophilic oesophagitis (EOE) in children

Paediatric Gastroenterology

Information for Patients & Parents

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What is Eosinophilic oesophagitis (EOE)?



Your child has got a condition called Eosinophilic oesophagitis (EOE) that affects the oesophagus (food pipe). It happens when a type of white blood cell (called eosinophils) builds up in the food pipe. These cells help fight infections but can also cause allergies. For example, in children with seasonal allergies, eosinophils are found in the nose and those who have asthma, they are found in the lungs.

In children with EOE, eosinophils causes swelling and irritation in the oesophagus, making it harder to swallow.

Who can have EoE?

Anyone from any age, from young children to adults, can have EoE. But it is a rare condition. 1 in 1500 children can have it. It is still not clear why people get this condition. It can be due to the body reacting to food and air components which are also called allergens. These triggers include:



What causes this?

A person with EOE has not done anything to cause it. It is a way that their bodies react to certain foods and environmental allergens randomly. There is a connection between EoE and other allergic conditions like food allergies, eczema and asthma. But this connection is not fully understood. Because the body's reaction is similar to that in asthma, EoE is said to be 'asthma of the oesophagus'.

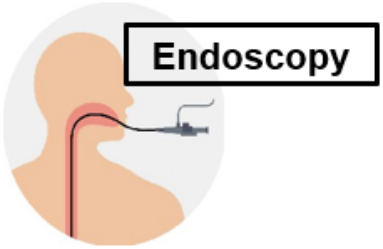
Symptoms



The symptoms are different for each child and can vary with age.

Younger children can have: • tummy pain • being sick • reflux • not wanting to eat	**Older children** can have: • problem swallowing • feeling like food is stuck on its way down to the tummy. This can cause chest pain.

How does the doctor check if my child has EoE?



- We use a thin bendy tube with a small camera at the end to look at your child's food pipe and stomach. This is called an endoscope. We can do this as the child is put to sleep. This procedure is called endoscopy.
- Small parts of tissue (also called biopsy), are taken from the lining of the food pipe and sent to a laboratory. They look at this tissue under a high power field microscope and count the number of eosinophils. To diagnose EOE, there should be at least more than 15 eosinophils seen under the microscope.
- Allergy tests like skin prick tests and blood tests are not helpful for finding out if your child has EoE.



What are the treatments?

There are 3 main treatments for EoE. Your doctor will start you on any 1 of the below treatments or a combination of them. They will evaluate your progress individually. They include the following options:



1. Exclusion diet



2. Anti reflux medications



3. Steroid: Jorveza

What is an exclusion diet?

- For some children an exclusion diet is best. This means avoiding foods which can trigger EoE. This can be cow's milk, soy, wheat/ gluten, eggs, fish, and nuts (see list on page 1).
- This will be done with the advice of our team of experienced dieticians at the hospital. Our dieticians will decide which foods need to be taken out of your child's diet. They may decide to get rid of 2 or more foods based on your child's clinic assessment.

- Once symptoms get better and the inflammation has been reduced. Foods are then brought back into the diet to help narrow down the exact allergens that cause EoE symptoms.
- It is important to eat healthy foods while following the diet. Our dietitian who knows a lot about EoE can help you do this.
- The diet works well for many children, but it can be hard to stick to for a long time. Sometimes your child may be put on a more strict controlled diet if other treatments before have not worked well.



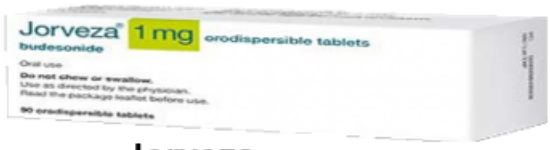
What are anti reflux medications?

For some children, anti reflux medications may help with symptoms. These medicines work by lowering the amount of acid in the stomach. It stops the acid from rising into the food pipe and causing discomfort. For some children, these medications alone can make a big difference and help them feel better. While some children improve with just these medicines, others may need additional treatments. This can include changes to their diet, as mentioned above or a special medicine called Jorveza. This is a steroid that helps reduce swelling and irritation in the food pipe. The doctor will carefully assess your child's condition and decide on the best treatment plan to help.

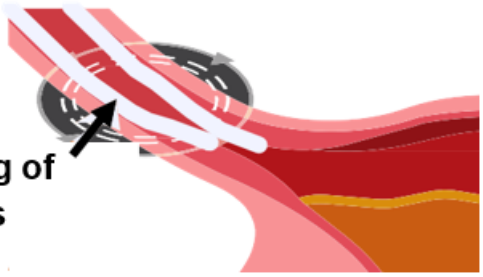
Steroid medication: Jorveza

Some children may be directly started on steroids which is Jorveza. This is an oro-dispersible medicine. This means the medicine dissolves in the mouth and mixes with the saliva. It coats the food pipe. This helps reduce the inflammation and make you feel better.

Jorveza can be used in combination with other treatments like exclusion diet and anti reflux medications. But your doctor will decide this.



Jorveza



How to take Jorveza?

To make sure the medicine works in your food pipe:

1. Place the tablet on the tip of your tongue.
2. Close your mouth and press the tablet gently against the roof of your mouth. Do this until the tablet has dissolved. This takes about 2 minutes.
3. Swallow the dissolved tablet, bit by bit, with saliva only.
4. Do not chew the tablet or swallow it whole.
5. Do not have any liquid or food or rinse your mouth for at least 30 minutes after taking it.

You can scan this QR code or visit https://scnv.io/VTYh?qr=1 to know how to take this tablet:

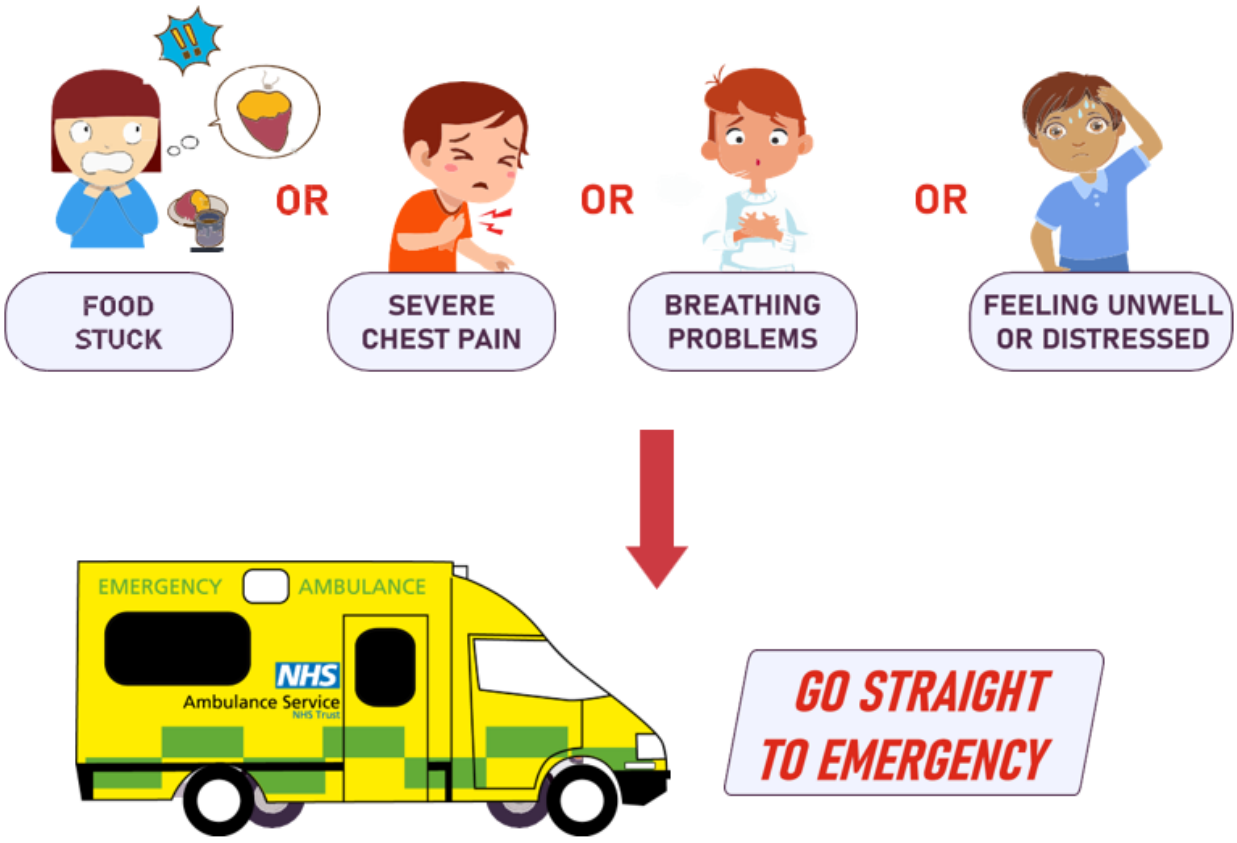
(Ref: drfalk.co.uk)

What will happen over time?

- Sometimes even when treatment is successful, EoE symptoms can come back. We do not know exactly how the condition will affect children over time. With treatment your child can grow up healthy and live a full life, even if EoE never completely goes away.
- If EoE is not treated, your child's food pipe can become narrow. This can make swallowing difficult. This is why it is important to follow the treatment plan even if your child seems fine.
- After treatment, the doctor will look again into your child's food pipe to see how things are improving. This is called an endoscopy.
- As your child grows older, they will learn to manage their condition and make healthy choices. By adulthood, they should be able to take care of their EoE with the support of their GP if needed. Following the right treatment will help them stay healthy and enjoy life to the fullest.

What to do in an emergency?

Please go to the emergency department if your child has any of the following symptoms as below:



For more Information on EoE follow the links or scan the QR codes below:

1. EOS Network resources : www.eosnetwork.org/childrens-diets-in-eoe

2. GI Kids website, Help & Hope for Children with Digestive Disorders: https://gikids.org/eosinophilic-esophagitis/resources/

To access this leaflet online, search for: 'Eosinophilic oesophagitis (EOE) in children'.

If you have any questions, write them down here to remind you what to ask when you speak to your dietician/consultant.

Health information and support is available at www.nhs.uk or call 111 for non-emergency medical advice
Visit www.uhleicester.nhs.uk for maps and information about visiting Leicester's Hospitals.
To give feedback about this information sheet, contact uhl-tr.informationforpatientsmailbox@nhs.net

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إذا كنت ترغب في الحصول على هذه المعلومات بلغةٍ أُخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل
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જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો.

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email uhl-tr.equalitymailbox@nhs.net

We are a research hospital and you may be asked to take part in research

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