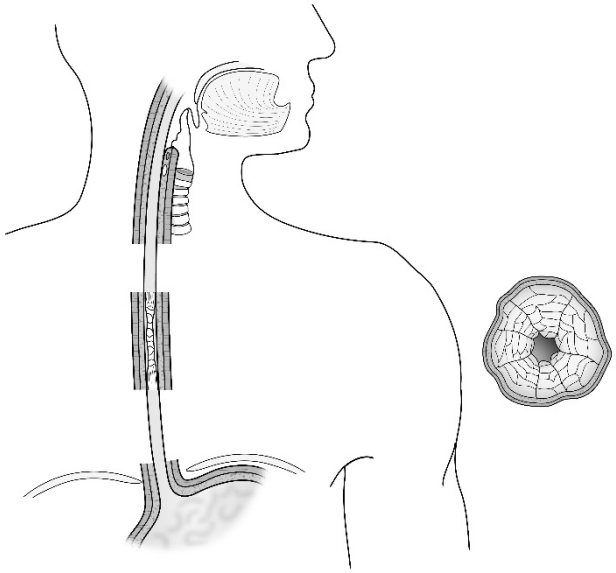
Eosinophilic Esophagitis (EoE)

Eosinophilic esophagitis (EoE) is a chronic disorder in which the esophagus (food pipe) becomes inflamed, swollen, and scarred. EoE is caused by a chronic "allergic" reaction to food, fluid, or inhaled and swallowed allergens. EoE may prevent food from going smoothly into the stomach.



What are the symptoms?
EoE leads to a feeling of food sticking, reflux, chest fullness or pain. When a bite of food is bigger than the size of the food pipe, food becomes stuck and obstructs the pipe. If the food does not pass, then an urgent procedure, called an endoscopy, is needed to remove the food.

How is it diagnosed?
Biopsies are taken during an endoscopy. An endoscopy is a sedated procedure where a flexible camera scope is put down the food pipe to look at the lining. Biopsies are required to confirm EoE.

Is there a cure?
Like allergies or asthma there is no cure for EoE. EoE that is not treated can lead to scarring and narrowing of the food pipe. Early treatment may prevent more problems with swallowing.

What is the treatment?
Treatment for EoE:

a. The first treatment is a twice a day dose of a proton pump inhibitor medicine (PPI) to suppress acid and treat reflux. If you respond to this, then ongoing treatment with a PPI is fine.
b. You may need topical swallowed steroids to improve swelling.
c. Endoscopic dilation may be needed to stretch and dilate the food pipe if medicine doesn't treat your symptoms.
d. We suggest a six-food elimination diet (6-FED). This diet gets rid of 6 common food groups that trigger the swelling (dairy, wheat, eggs, nuts, soy, seafood). Food groups are brought back into the diet one at a time. Refer to *Health Facts for You* #553.
e. Dupilumab (Dupixent), a once weekly injected medicine, is another option.
f. Cut small pieces and chew food well before trying to swallow. This will help food go smoothly down the food pipe into the stomach. Problem foods such as grisly meats, dry foods, raw vegetables and fruits should be eaten with care.

Follow Up

Follow up depends on the treatment program. In most cases, you will follow up 2 months after treatment. Track your trouble with eating and drinking, changes in weight, chest pain, or reflux.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 4/2025 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7845