

For U.S. Healthcare Professionals



HOW THE **LATEST** **DIAGNOSTIC CRITERIA** MAY HELP YOUR PATIENTS WITH EoE

EoE Diagnostic Algorithm

EoE is suspected on a clinical basis with chronic symptoms of esophageal dysfunction.¹

Clinical presentation suggestive of EoE

EGD with biopsy



Esophageal eosinophilia ≥ 15 eos/hpf (~ 60 eos/mm²)

Evaluate for non-EoE disorders that cause or potentially contribute to esophageal eosinophilia



EoE

EoE=eosinophilic esophagitis, EGD=esophagogastroduodenoscopy, eos/hpf=eosinophils per high-power field.

PPI-REE CAN CONTRIBUTE TO DIAGNOSTIC DELAYS IN EoE¹

Up until 2018, experts believed that evaluating the response to a proton pump inhibitor (PPI) was the best way to rule out inflammation related to gastroesophageal reflux disease (GERD) in patients with EoE. This led to the term PPI-responsive esophageal eosinophilia (PPI-REE), which was initially considered a separate disease. Current guidelines no longer support using PPIs as a diagnostic tool.*¹ Therefore, PPI-REE is now considered a subtype of EoE and not a separate disease. In all cases, EoE should be diagnosed through a holistic assessment of symptoms, endoscopy, and histopathology.

PRINCIPLES FOR UPDATED EoE DIAGNOSTIC CRITERIA¹

- Criteria were crafted to be applicable to all ages
- A focus on removing the PPI trial from the criteria
- Emphasized the need to evaluate for conditions that might contribute to esophageal eosinophilia rather than require their exclusion
- A requirement to organize the criteria in a clinically meaningful way
- A requirement to have utility in both clinical practice and research trials, as well as applicability to patients who had been diagnosed with EoE under previous guidelines

Due to patchy infiltration of eosinophils along the esophagus in EoE, multiple biopsies should be taken from distal, mid, and proximal locations.¹⁻³

*As per the 2018 updated International Consensus Diagnostic Criteria for EoE from the AGREE Conference.¹

PPI-REE=proton pump inhibitor-responsive esophageal eosinophilia, GERD=gastroesophageal reflux disease, AGREE=A Working Group on proton pump inhibitor-responsive esophageal eosinophilia.

RATIONALE FOR CHANGING THE EoE DIAGNOSTIC CRITERIA AND REMOVING THE PPI TRIAL¹

Similarities between EoE and PPI-REE

EoE and PPI-REE share similar clinical, endoscopic, histologic, immunologic, and molecular features before PPI treatment. This suggests that distinguishing these entities with a medication trial is artificial, and that PPIs are better positioned as a treatment for EoE.

EoE and GERD are not necessarily mutually exclusive

Initial rationale for the PPI trial was to distinguish EoE from GERD, but it is now known that these conditions have a complex relationship and are not necessarily mutually exclusive.

Lack of a criterion standard for GERD diagnosis

Without a definitive method for defining GERD, no single test (including a PPI trial) can exclude the presence of GERD.

Novel mechanisms of action of PPIs to explain response of eosinophilia

Mechanisms that support PPIs as a treatment for EoE and esophageal eosinophilia include acid-independent anti-inflammatory/anti-eosinophil activity and reversal of epithelial permeability.

Observation that PPI-REE could also respond to classic EoE treatments

Patients with PPI-REE can also have a response to dietary elimination or topical steroid therapy, further blurring the line between EoE and PPI-REE.

Concern about using a treatment response to define a disease

Few diseases are primarily defined by response to treatment, and doing so limits potential treatment options for patients with EoE and esophageal eosinophilia.

EoE DIAGNOSTIC CRITERIA¹

- **Symptoms** of esophageal dysfunction
 - Concomitant atopic conditions should increase suspicion for EoE
 - Endoscopic findings of rings, furrows, exudates, edema, stricture, narrowing, and crepe paper mucosa should increase suspicion for EoE
- **≥15 eos/hpf (~60 eos/mm²)** on esophageal biopsy
 - Eosinophilic infiltration should be isolated to the esophagus
- **Assessment of non-EoE disorders** that cause or potentially contribute to esophageal eosinophilia



Scan to learn more about
diagnosing and managing EoE.

This educational flashcard is not a diagnostic tool.

References: 1. Dellon ES, Liacouras CA, Molina-Infante J, et al. *Gastroenterology*. 2018;155(4):1022-1033.e10. 2. Lucendo AJ, Molina-Infante J, Arias A, et al. *United European Gastroenterol J*. 2017;5(3):335-358. 3. Saffari H, Peterson KA, Fang JC, et al. *J Allergy Clin Immunol*. 2012;130(3):798-800.

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