

# Optimise Eosinophilic Oesophagitis (EoE) Care

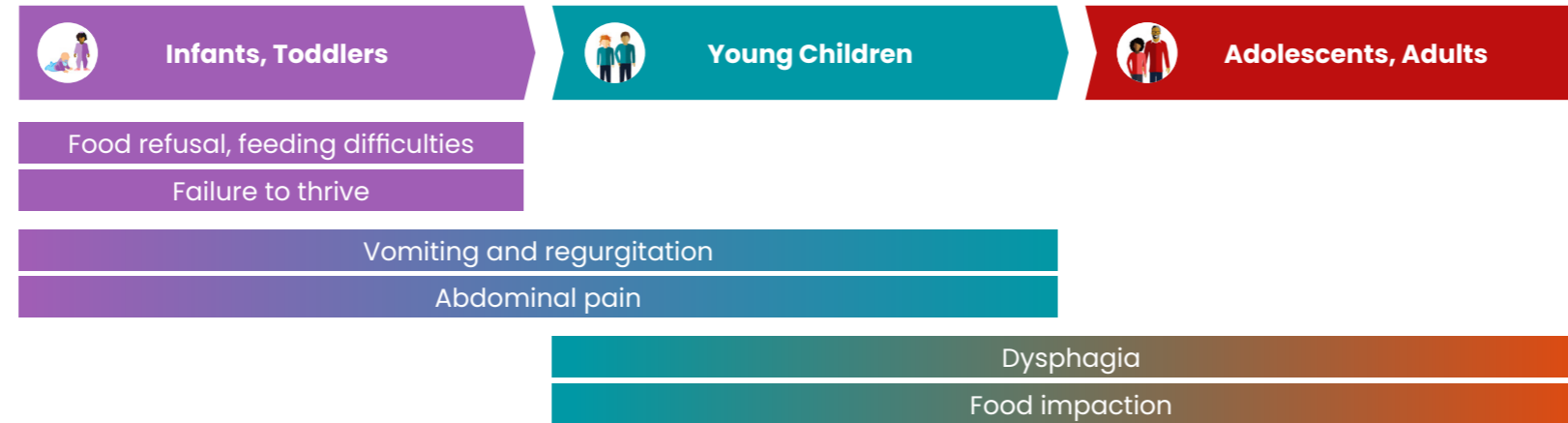
Based on the medical symposium 'Something to Chew On: Exploring Biologics in the Management of EoE', presented at UEG Week, held from 4th–7th October 2024 in Vienna, Austria.

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**EoE, which involves Type 2 inflammation, and a predominant infiltration of eosinophils, is a chronic immune- and allergy-mediated disease that damages the oesophagus. It can be progressive, but diagnosis and treatment are often delayed, which can negatively impact physical health and quality of life.<sup>1</sup>**

## EoE Symptoms May Vary<sup>2</sup>



## Symptoms

EoE symptoms vary by age and may reflect disease progression.<sup>2</sup> Detecting them can be challenging.

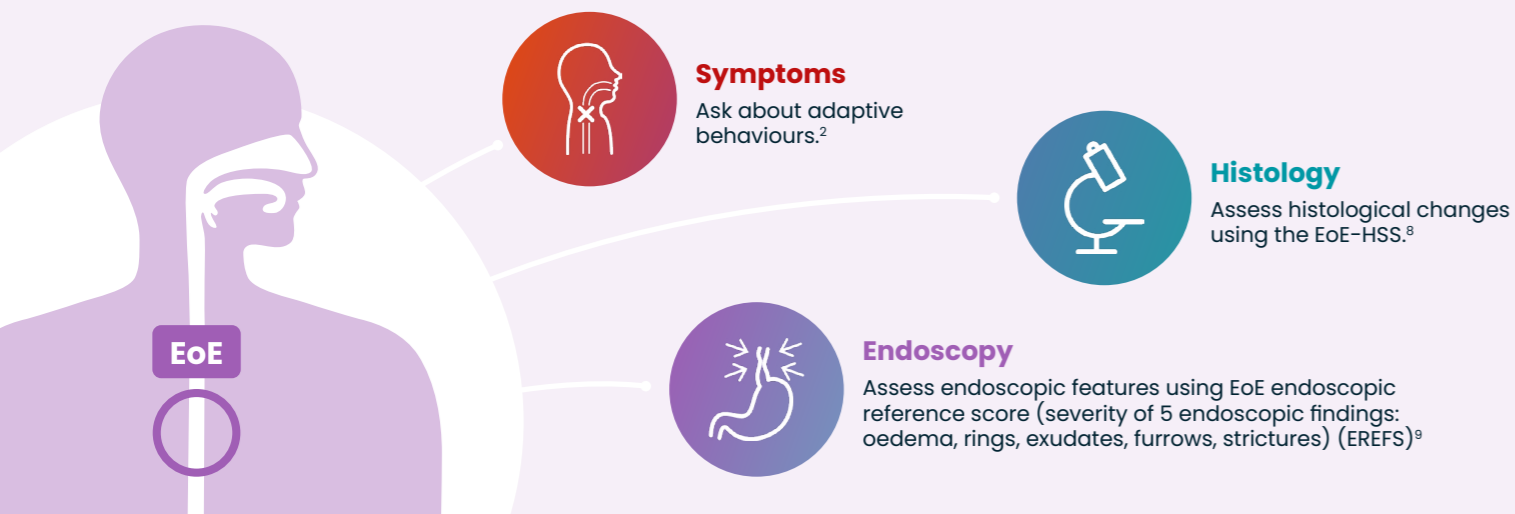
- In infants and young children, symptoms can be non-specific.<sup>2</sup>
- Patients may mask the symptoms with compensating behaviours.<sup>2</sup>

## Adaptive Behaviour

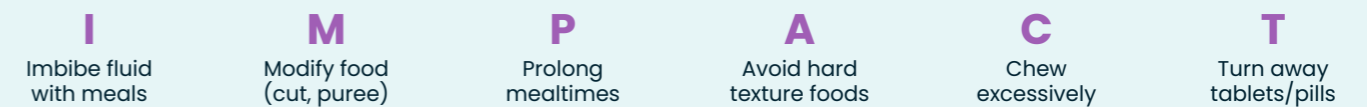
Identify adaptive behaviours by asking patients the right questions:<sup>2</sup>



## Patient-centred Assessment Focuses On:

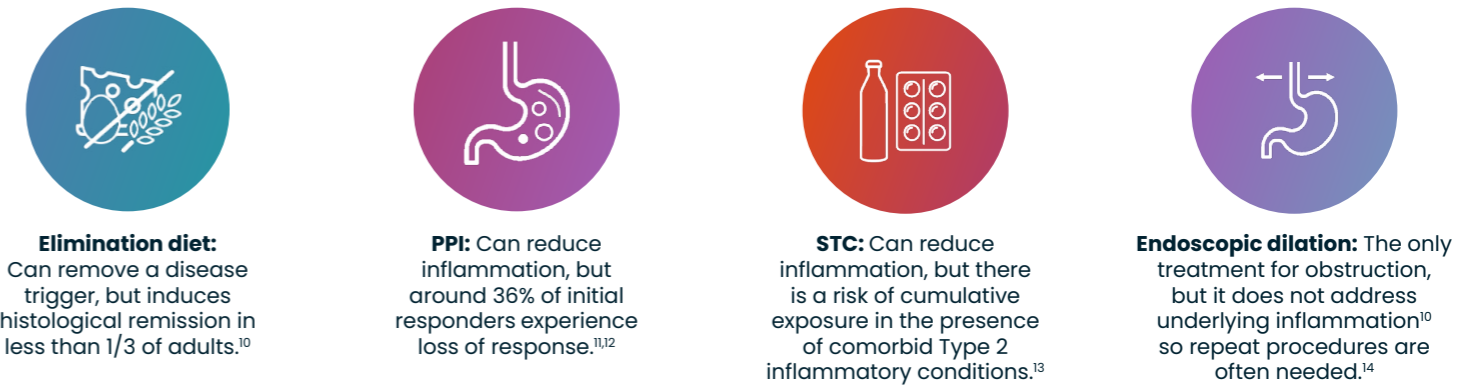


## Adaptive behaviours that **IMPACT** symptom assessment



## Conventional Therapies and the Importance of Maintenance and Monitoring

As relapses can occur when treatment is discontinued, **maintenance may reduce the risk of complications.**<sup>5</sup> Conventional treatments have risks and benefits, **so monitoring response is key.**



## Long-term Follow-up of EoE is Associated With:



After 2 years without follow-up, each additional year of absent EoE care increases the odds of stricture by 26%.<sup>6</sup>

26%

Yet, up to 55% of patients can be lost to follow-up after presenting as an emergency with food impaction.<sup>7</sup> Regular assessment, every 12–24 months, may detect relapses as early as possible, and minimise the risk of EoE complications.<sup>4</sup>

55%

## Emerging Therapies

**Biologics are an emerging treatment strategy for EoE. They may be an option for those who do not respond to conventional treatments or in whom such treatments are contraindicated.**



## Conclusions:

- Understanding the symptoms and the importance of ongoing management is essential to avoiding complications and providing quality care to children and adults living with EoE.
- While conventional treatments have limitations, emerging biologic medicines could represent a promising option.

## Abbreviations:

EoE: eosinophilic oesophagitis; EoE-HSS: EoE Histology Scoring System; EREFS: EoE endoscopic reference score (severity of 5 endoscopic findings: oedema, rings, exudates, furrows, strictures); mAb: monoclonal antibody; PPI: Proton pump inhibitor; STC: swallowed topical corticosteroids.

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