

### **POSTER PRESENTATION**



# Managing paediatric eosinophilic gastroenteropathies: a community experience

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#### Introduction

Awareness and diagnoses of eosinophilic gastroenteropathies have increased over the past decade. We report 3 cases of eosinophilic gastroenteropathies in children who were diagnosed by endoscopy, allergy tested by skin prick and patch testing, and managed with the use of avoidance/elemental diets.

#### **Case series**

KG, a 5 year old girl with daily abdominal pain, was diagnosed with eosinophilic esophagitis. Initial endoscopy revealed 20 eosinophils/hpf in the distal esophagus. Avoidance diet based on allergy testing was an ineffective treatment. An elemental diet of Neocate (8 weeks) resulted in resolution of symptoms and 0 eosinophils/hpf on repeat biopsy. She is currently on a gradual reintroduction diet.

CD , an 11 year old boy with chronic diarrhea/constipation, abdominal pain and disruptive behaviour, was diagnosed with eosinophilic colitis. (60 eosinophils/hpf) An avoidance diet (8 weeks) based on allergy testing resulted in resolution of all abdominal symptoms and better behaviour. Repeat colonic biopsies revealed colonic eosinophils to be reduced back to normal limits. CD returned to normal diet, and symptoms have recurred.

TD, a 9 year old boy with daily stomach aches and vomiting, was diagnosed with eosinophilic esophagitis (20 eosinophils/hpf). An avoidance diet based on allergy testing resulted in resolution of symptoms. Repeat biopsy is pending.

#### Conclusion

Allergists play an important role in trying to identify the triggers for these conditions and implementing appropriate diets for management. The challenges in

managing these conditions in the community include i) no standard of care for management ii) availability of the 3 subspecialists (paediatric pathology, allergy and paediatric gastroenterology) with an interest/expertise in eosinophilic gastroenteropathies iii) health care resources (eg. availability of operating room time to perform repeat biopsies) iv) tolerability of avoidance/elemental diets.

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