

# Eosinophilic Esophagitis (EoE)

## What is Eosinophilic Esophagitis (EoE)?

Eosinophilic Esophagitis (EoE) is a chronic, progressive, immune-mediated disease that affects the esophagus.<sup>1</sup>

In patients with EoE, eosinophils – which are a type of white blood cell – build up along the lining of the esophagus, resulting in dysfunction, inflammation and tissue damage.<sup>1</sup>



## Symptoms

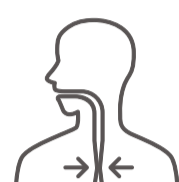
Signs and symptoms of EoE vary with age. When the disease is active in adolescents or adults, symptoms may include:<sup>1,2</sup>



Difficulty swallowing (dysphagia)



Food becoming stuck in the esophagus (impaction)



Esophageal narrowing (stricture)



Decreased appetite



Upper abdominal pain



Vomiting



Pain with swallowing



Exercise-induced chest pain



Heartburn

In infants or young children, the most common symptoms include:<sup>3,4</sup>

Feeding difficulties including feeding refusal/aversion

Abdominal pain

Nausea/vomiting

Heartburn and regurgitation

Atopic disorders (food allergy, asthma, chronic rhinitis)

Some infants and children may experience poor weight gain, known as "failure to thrive."

## Disease Burden

EoE can result in serious complications. For instance, when food becomes lodged in the esophagus, known as impaction, it can result in a medical emergency if a person is not able to swallow or vomit.<sup>1</sup>

Beyond the medical impact, the burden of EoE significantly affects quality of life from a lifestyle and psychological perspective for both patients and their care providers. Patients with EoE may experience:<sup>6-8</sup>



Psychosocial impairments



Social difficulties



Anxiety



Depression



Sleeping difficulties



Problems in school



Impact on eating

Currently, an estimated **34.4 people per 100,000** live with EoE globally, with a higher prevalence in men than women.<sup>4,5</sup>

## Diagnosis & Treatment

Due to the varying symptoms of EoE, some of which overlap with other diseases, in addition to low disease awareness, patients are often misdiagnosed with gastroesophageal reflux disease (GERD).<sup>9</sup>

Endoscopy with a biopsy is necessary to diagnose EoE, but physicians may order blood tests as well.<sup>1,2</sup>



While EoE is becoming more prevalent around the world, patients have few treatment options. Because EoE is a chronic disease, patients typically require ongoing treatment to help manage symptoms, including:<sup>1,2</sup>



### DIETARY CHANGES

- Elimination diet (removing certain foods)



### MEDICINAL TREATMENTS

- Corticosteroids
- Proton pump inhibitors (acid blockers)

In some patients who don't respond to dietary changes or medicinal treatments, esophageal dilation may also be a potential course of action. Esophageal dilation involves endoscopic stretching of the esophageal strictures to relieve symptoms and improve the ability to swallow.<sup>1,2</sup>

Bristol Myers Squibb is committed to researching and pursuing new treatment options and innovative development approaches to help deliver transformational medicines for patients with EoE and other immune-mediated diseases.

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