Article published online: 2024-07-31

Eosinophilic Esophagitis: An Uncommon Cause of Dysphagia in India

Vishal Bodh[1] Brij Sharma[1] Nidhi Raina[2] Anshul Bhateja[1]

[1] Department of Gastroenterology, Indira Gandhi Medical College and Hospital (IGMC) – Shimla, Himachal Pradesh, India
[2] Department of Pathology, Indira Gandhi Medical College and Hospital (IGMC) – Shimla, Shimla, Himachal Pradesh, India

Address for correspondence Anshul Bhateja, MD, Department of Gastroenterology, Indira Gandhi Medical College and Hospital (IGMC) – Shimla, Shimla 171001, Himachal Pradesh, India (e-mail: dr.anshulabh@gmail.com).

J Digest Endosc

A 42-year-old gentleman sought evaluation at our department, conveying a history of episodic dysphagia dating back to childhood, currently exacerbated by acute symptoms occurring within the past day subsequent to meal ingestion. Additionally, the patient disclosed a medical background of chronic urticaria, managed with Ayurvedic interventions. His general physical and systemic examination was within normal limits. His routine investigations including complete hemogram and peripheral smear were normal. His esophagogastroduodenoscopic (EGD) examination revealed esophageal rings, longitudinal furrows, along with the presence of impacted food bolus at 28 cm from the incisor (►**Fig. 1**). Impacted food bolus was removed with foreign body forceps, and rest of the EGD examination showed normal study for stomach and duodenum. Biopsies obtained from the upper, mid, and lower regions of the esophagus yielded evidence indicative of esophageal eosinophilia, supported by eosinophil counts reaching up to 40 per high-power field, and a reported histology scoring system score of 0.5 (►**Fig. 2**). Patient was started on trial of twice daily proton-pump inhibitor (pantoprazole 40 mg twice a day) for 2 months, after which repeat endoscopy and mucosal biopsy were performed. Repeat biopsy revealed persistence of esophageal eosinophils confirming diagnosis of immune-mediated eosinophilic

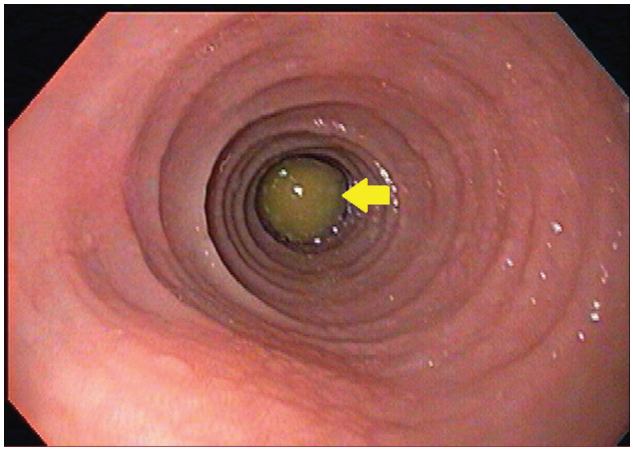

Fig. 1 Endoscopy image showing esophageal rings, furrows, and impacted food bolus (yellow arrow).

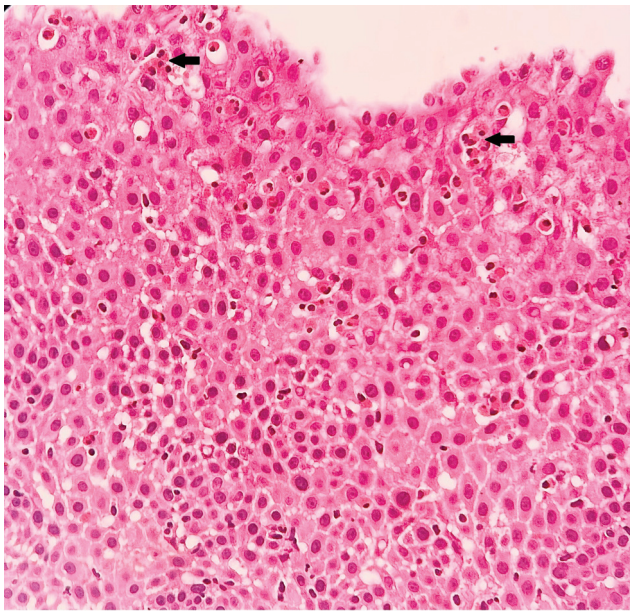

Fig. 2 400× hematoxylin and eosin (H&E) slide shows superficial squamous epithelium revealing basal cell hyperplasia long with eosinophilic exocytosis toward the surface compared with base (black solid arrow). More than 40 eosinophils/high-power field are noted in this photomicrograph.

DOI https://doi.org/10.1055/s-0044-1787142.
ISSN 0976-5042.

Thieme Medical and Scientific Publishers Pvt. Ltd., A-12, 2nd Floor, Sector 2, Noida-201301 UP, India

esophagitis (EoE). Patient was started on dietary management and topical steroids.

In India, data regarding EoE remains scant. A solitary center investigation conducted in North India documented a prevalence of EoE among patients with gastroesophageal reflux disease at 3.2%.[1] Similarly, another single-center study from Northwestern India revealed a prevalence of 3.9% within the pediatric population.[2] Notably, certain authors have questioned the existence of EoE in the Indian context.[3] Despite these debates, it is evident that EoE does manifest in India and is progressively being diagnosed. There is a need to exercise increased vigilance and awareness concerning this condition, given the remarkable responsiveness of EoE to treatment, which can substantially enhance the patient's quality of life.

Consent to Participate

Patient provided informed consent to participate.

Authors' Contributions

V.B. came up with the idea, material preparation and original draft written by A.B., N.R. helped with the data collection, and manuscript was reviewed and revised by B.S. All the authors read and approve the final manuscript.

Funding

None.

Conflict of Interest

None declared.

References

1 Baruah B, Kumar T, Das P, et al. Prevalence of eosinophilic esophagitis in patients with gastroesophageal reflux symptoms: a cross-sectional study from a tertiary care hospital in North India. Indian J Gastroenterol 2017;36(05):353–360

2 Prasad KK, Thapa BR, Lal S, Nain CK, Sharma AK, Singh K. Prevalence of eosinophilic esophagitis in a pediatric population: single-center experience in Northwestern India. Am J Clin Pathol 2012;138(01):A350

3 Nagarajan KV, Krishnamurthy AN, Yelsangikar A, et al. Does eosinophilic esophagitis exist in India? Indian J Gastroenterol 2023;42(02):286–291

