

CHILDREN WITH EOSINOPHILIC OESOPHAGITIS (EOE): THE PARENTS GUIDE

The following is a summary. For detailed information please refer to my website cubspaediatricdietetics.au (EOE page in Clinical Specialities)

What is EOE?

- Eosinophilic oesophagitis is inflammation of the oesophagus (tube linking the mouth to the stomach).
- This inflammation occurs when white blood cells (eosinophils) deposit in the lining of the oesophagus.
- Typically a result of an allergic reaction to food or the environment.

What are the symptoms of EOE?

May include:

- Slow eating,
- Food impaction/food bolus obstruction (FBO) – food gets stuck on the way down the oesophagus,
- Choking or gagging on food,
- Regurgitation of foods,
- Abdominal (stomach) pain,
- Texture aversions,
- Very picky eaters,
- Loose stools.

How is EOE diagnosed?

Typically involves an endoscopy and biopsy under the care of your Paediatrician, performed by a Gastroenterologist:

- Endoscopic inspection of the oesophagus.
- Simultaneous collection and analysis of 3 tissue samples (biopsies) looking for eosinophils.



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How is EOE treated?

It depends on the trigger and the severity. The typical options involve medical treatments to reduce the inflammation, dietary modifications to eliminate the trigger and in some cases, a medical procedure to dilate and open the narrow oesophagus.

When is a Paediatric Dietitian involved?

When food is the cause of EoE, your Paediatric Gastroenterologist will arrange a referral to a Paediatric Dietitian to support you with dietary modifications. Milk, egg, wheat and soy are typically the major triggers. Seafood and nuts are less common.

What dietary modifications are needed?

- Food allergen elimination diets. Typically the removal of cow's milk, soy, egg, and wheat. The 2FED is a common diet plan.
- Step-up diets. Instead of removing many foods at the same time, one to two foods are removed at first, to see if symptoms improve, repeating a biopsy if they do. More foods will be removed at a later date if inflammation persists on biopsy.
- Amino acid based diets. These are based on amino acid/elemental formula and can be impractical in adults and older children, but are useful and commonly used for babies with EoE.

How do you know if the treatment is working?

Endoscopies and repeat biopsies are essential to monitor response to treatment. Symptoms alone are not a reliable guide. This will be guided by your Paediatric Gastroenterologist.

Is it common to have other allergic conditions?

Yes. Around 75% of children with EoE have other allergic conditions, such as allergic rhinitis or asthma. Assessment will be performed by your medical team to determine other allergic conditions.

THE TWO FOOD ELIMINATION DIET (2FED): THE PARENTS GUIDE

What is the 2FED?

Evidenced based practice shows 2FED has been shown to reduce symptoms of EOE. The goal of the diet is to find the foods causing the issue, so they can be left out in the future.

The diet involves:

- Strictly avoiding all foods and drinks that contain cow's milk (dairy) and wheat, even in very small quantities.
- Used for 8 to 12 weeks, to determine if eliminating certain foods help reduce symptoms. It's not intended as a long term solution.
- You'll be recording foods your child eats and noting any reactions.
- Effectiveness is evaluated by assessing symptoms and/or repeat endoscopy and biopsies.
- If symptoms improve, your child can gradually reintroduce these foods, one by one.

How to successfully follow the 2FED plan

1: Make substitutions

- Milk - Vitasoy soy milk, So Good oat or almond milk
- Cheese - Made With Plants cheese
- Yoghurt - Cocobella or Chobani oat yoghurt, Vitasoy yoghurt
- Butter - Nuttelex
- Custard - Vanilla Custard Coyo
- Ice cream - Magnum dairy-free, icy poles, coconut ice cream
- Wheat-free flours - eg almond, coconut, rice, oat, tapioca, corn

2: Shop with the help of online resources

- Find dairy-free and wheat-free foods easily by using the filter feature on the Woolworths and Coles app

3: Read food labels for dairy and wheat

- By learning to read labels you can quickly see which foods contain dairy or wheat (the next page teaches you how)

4: Reintroductions

- Each food will be reintroduced one by one, in consultation with your Paediatrician and Paediatric Dietitian.

HOW TO READ A FOOD LABEL FOR DAIRY & WHEAT: THE PARENTS GUIDE

Step 1: Scan the ingredients list for the bold items

In the list of ingredients, milk and wheat are highlighted in bold, indicating that this product is not suitable for a child who needs to avoid dairy or wheat.

Step 2: Check the 'Contains' section

This section clearly indicates if the product contains milk or wheat. Very helpful because dairy ingredients can go by various names, such as whey, casein, caseinates, lactose and lactoglobulin.

Step 3: The 'May contain traces of' section

Important for certain types of allergies but not for EoE. Children with EoE can have foods that say 'may contain traces of dairy or wheat'.



MEAL PLAN FOR A CHILD ON AN EXCLUSION DIET FOR EOE

Breakfast:

- Eggs on gluten-free toast with Nuttelex
- Oats with oat milk or almond milk with honey and fruit
- Cocobella or Chobani oat yoghurt with fruit
- Gluten-free rice pops or corn flakes

Lunch:

- Tortilla wraps with ham, Made With Plants cheese and salad
- Gluten-free bread with tuna, Made With Plants cheese and salad
- Corn cakes with peanut butter or tuna
- Leftovers from dinner
- Sushi with avocado and tuna

Dinner:

- Spaghetti bolognese with gluten-free pasta
- Risotto with chicken and vegetables
- Meat stir fry with rice and vegetables
- Gluten-free chicken nuggets and chips

Snacks:

- All fruits
- Corn or rice thins with peanut butter or vegetable and Made With Plants cheese
- Cocobella yoghurt, Chobani oat yoghurt, Vitasoy yoghurt
- Sam's Pantry nut bars (honey salted macadamias)

*For more information or to book an appointment,
please check my website, call or send an email.*



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