

Observation of the incidence of eosinophilic oesophagitis (EoE) in oesophageal atresia/fistula (OA/TOF).

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Introduction

Recently attention has been drawn to an increased incidence of EoE in OA patients. OA/TOF patients are often troubled by dysphagia and other swallowing difficulties. We aimed to determine how frequently EoE occurs in OA/TOF patients.

Method

Retrospective chart review of all patients with a diagnosis of OA/TOF who presented to TCH over 17 years until 2020, whether locally born or not. We recorded patient demographics; whether the patient had a follow-up endoscopy, and endoscopic findings.

Reference

1. Limketkai BN, Shah SC, Hirano I, et al. Gut 2019;68:2152–2160. “Epidemiology and implications of concurrent diagnosis of eosinophilic oesophagitis and IBD based on a prospective population-based analysis.”

Results

There were 47 cases of OA/TOF with 28 boys. 10 had a pure OA, 36 OA/TOF, 1 case unknown. Average length of follow-up was 9.8 years. There were four deaths.

20 patients had subsequent oesophageal biopsies recorded. EoE is recorded in six (average age 8.2 years, 50% female); changes of gastro-oesophageal reflux (GORD) in five (average age 11.5 years, all male).

Discussion

We have included all patients with a primary diagnosis of OA/TOF seen here. Not all locally born patients will have had endoscopy. Non-locally born patients will likely only present if symptomatic. This survey will therefore be biased towards those who had symptoms. EoE is felt to be present in the population at 23/100,000 man years, twice the rate of Crohn’s disease.¹ At 6/20, EoE in OA/TOF is therefore much more common than in the background population.



Figure 1: Normal oesophagus.



Figure 2: EoE in repaired OA patient.

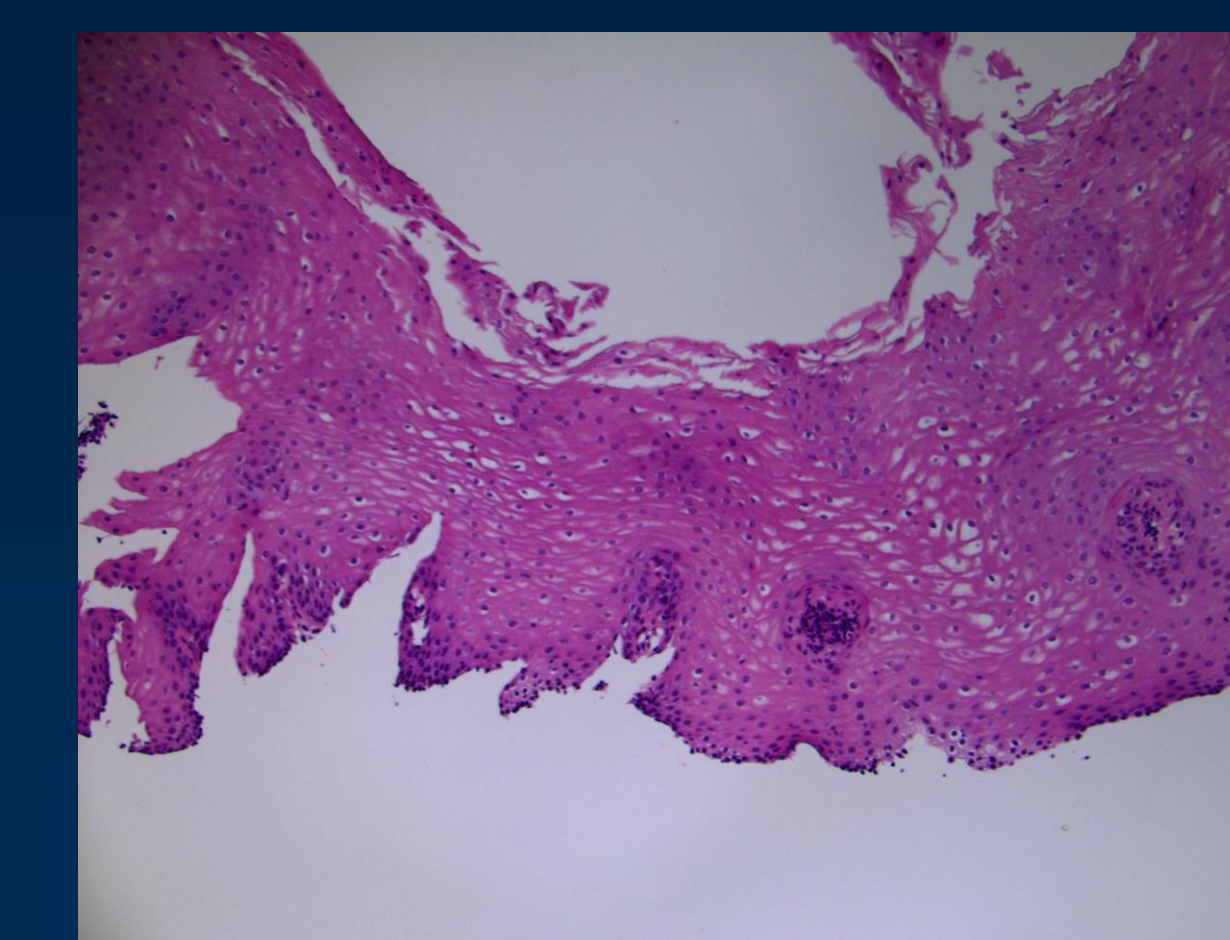


Figure 3. Normal histology of oesophagus.

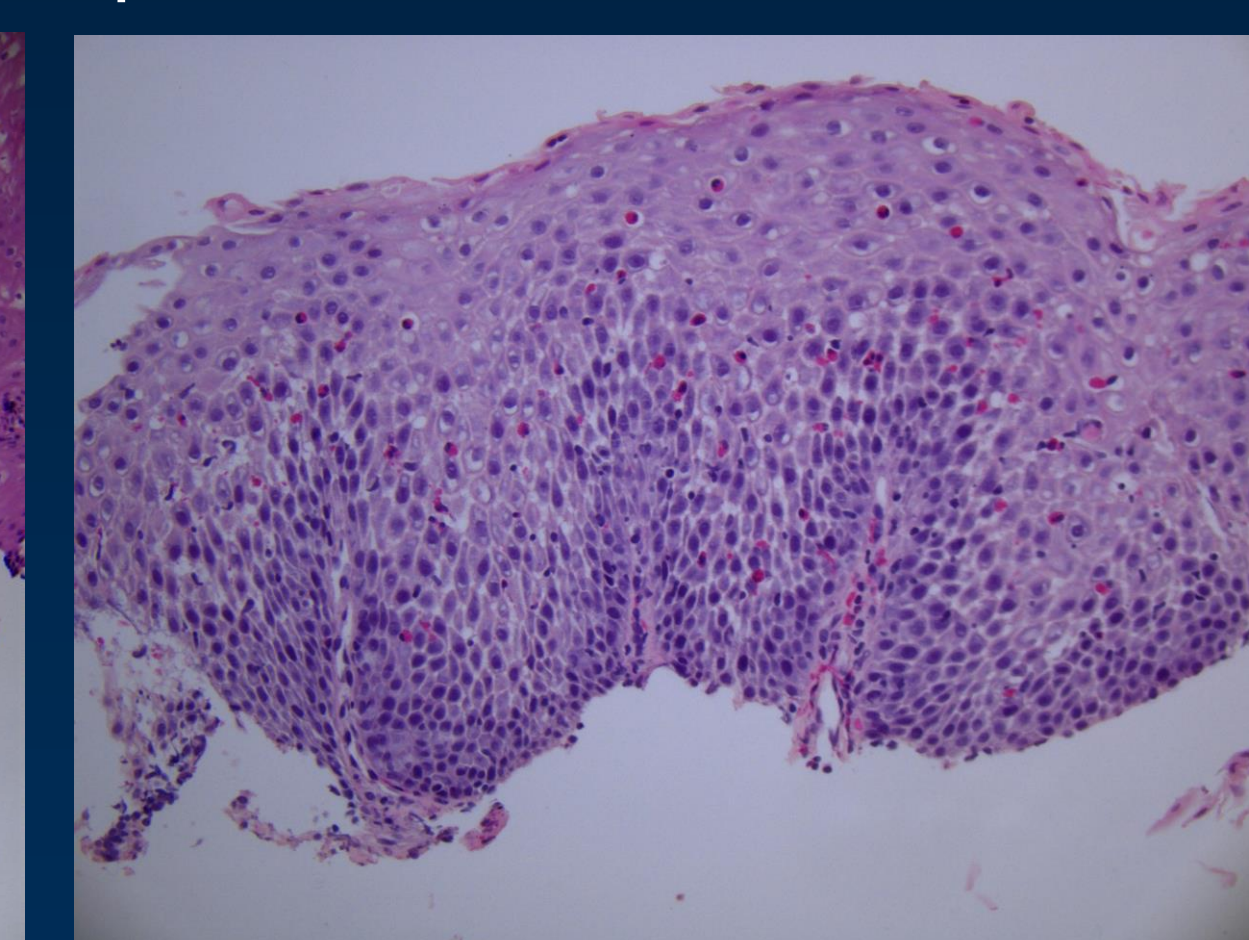


Figure 4. Histology of EoE

Conclusion

The current series is selected for those OA/TOF patients with symptoms who were felt to need assessment with biopsies. It is notable that EoE is at least as common as GORD in this cohort – 30% of biopsies, and likely an important contributor to symptoms.

