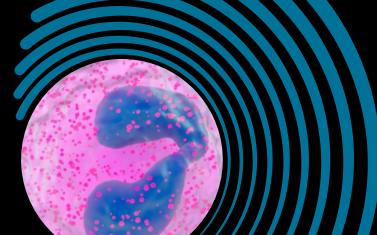


# PAYER RESOURCE GUIDE TO Eosinophilic ESOPHAGITIS (EoE)



## ABOUT EoE

Eosinophilic esophagitis (EoE) is a chronic, immune-mediated, inflammatory disorder of the esophagus. It is a Th2-mediated condition believed to be triggered by allergen exposure, which increases levels of inflammatory cytokines including interleukin (IL)-4, IL-5, and IL-13. Disease progression can lead to remodeling, narrowing, fibrosis, and food impaction. Proton pump inhibitors (PPIs), swallowed topical steroids, and dietary elimination are recommended as first-line treatments for EoE, with the choice often dictated by the clinical presentation and a shared decision-making framework between patients and providers. Esophageal dilation is also used for treatment of esophageal strictures or narrowing when they are present.

## COMMONLY RECOMMENDED TREATMENTS

Intervention	Examples	Proposed MOA	Payer Considerations
Dietary treatment	Elemental diet/formula	Avoidance of food antigens.	Insurance coverage for elemental formula varies. Insurance companies that provide coverage for elemental formulas typically classify it as Durable Medical Equipment (DME) and claims submitted under pharmacy coverage are often denied. Long-term adherence to elimination diets is difficult and out-of-pocket costs can be a barrier to access for some patients.
Swallowed topical steroids	<b>Adults</b> Budesonide 2 mg twice daily Fluticasone MDI 880-1760 µg/day  <b>Children</b> Budesonide 1-4mg/day Fluticasone MDI 110-1760 µg/day (dose is dependent on size and age)	Broad steroid effect including reduction of inflammatory cells and fibrosis and decrease of esophageal eosinophils, mast cells, T-cells and proinflammatory cytokines as well as restoration of epithelial barrier function and reduction of tissue remodeling.	Budesonide was approved for EoE by the US Food and Drug Administration in 2024. Esophageal delivery of budesonide mixed into a slurry (oral viscous budesonide) and fluticasone swallowed from an MDI are off-label options and were commonly used in EoE before the development of the esophageal-specific formulations.
PPIs	<b>Adults</b> Omeprazole 20–40 mg twice daily Esomeprazole 40 mg once to twice daily; any of the other PPIs at “double dose”  <b>Children</b> Omeprazole 1–2 mg/kg/day or equivalent dosing for any of the PPIs (essentially “high-dose” PPI)	Both anti-secretory and anti-inflammatory mechanisms.	Available without a prescription (OTC, but multiple OTC tablets/capsules are often required to achieve the correct dose) and often non-prescription products are excluded from coverage under pharmacy benefits.
Biologics	<b>Dupilumab</b> Patients aged 1 to 11 years, weighing at least 15 kg, and aged 12 years and older, weighing at least 40 kg	Dupilumab inhibits IL-4 and IL-13 signaling by specifically binding to the IL-4Rα subunit shared by the IL-4 and IL-13 receptor complexes.	First medication to gain regulatory approval for the treatment of EoE in the U.S. EoE is a primary indication not predicated on failed response to other agents; however, in the pivotal EoE trials all patients had PPI-refractory disease and 70% had tried additional management such as diet or steroids.
Esophageal dilation	Procedure performed during upper endoscopy to mechanically open the esophagus	Helps relieve symptoms of dysphagia and food impaction in individuals who have developed esophageal strictures.	Esophageal dilation can provide relief from the symptoms of EoE, but it does not mitigate the inflammation that causes symptoms.

EoE, eosinophilic esophagitis; IL, interleukin; MDI, metered-dose inhaler; MOA, mechanism of action; OTC, over-the-counter



2025

### [ACG CLINICAL GUIDELINE: DIAGNOSIS AND MANAGEMENT OF EOSINOPHILIC ESOPHAGITIS](#)

*This American College of Gastroenterology Clinical Guideline is an update of the 2013 version. Since that time there have been paradigm-shifting changes in disease diagnosis and management, increases in knowledge about EoE risk factors, natural history, and pathogenesis, development of validated outcome metrics, a disease severity classification system, and updated nomenclature.*

2023

### [DEVELOPMENT OF A PRACTICAL GUIDE TO IMPLEMENT AND MONITOR DIET THERAPY FOR EOSINOPHILIC ESOPHAGITIS](#)

*This review aims to summarize evidence in support of dietary therapy in eosinophilic esophagitis while providing guidance on initiation and implementation of dietary therapy for providers.*

2022

### [BRITISH SOCIETY OF GASTROENTEROLOGY AND BRITISH SOCIETY OF PAEDIATRIC GASTROENTEROLOGY, HEPATOLOGY AND NUTRITION JOINT CONSENSUS GUIDELINES ON THE DIAGNOSIS AND MANAGEMENT OF EOSINOPHILIC ESOPHAGITIS IN CHILDREN AND ADULTS](#)

*A single comprehensive guideline for both pediatric and adult gastroenterologists on current best practice for the evaluation and management of EoE from the Oesophageal Section of the British Society of Gastroenterology.*

### [ENDOSCOPIC APPROACH TO EOSINOPHILIC ESOPHAGITIS: AMERICAN SOCIETY FOR GASTROINTESTINAL ENDOSCOPY CONSENSUS CONFERENCE](#)

*A group of 20 expert clinicians and investigators in EoE were assembled to provide guidance for the use of endoscopy in EoE. Endoscopy is essential for diagnosis, assessment of response to therapy, treatment of esophageal strictures, and ongoing monitoring of patients in histologic remission.*

### [CLINICAL SEVERITY INDEX FOR EOSINOPHILIC ESOPHAGITIS: DEVELOPMENT, CONSENSUS, AND FUTURE DIRECTIONS](#)

*A multidisciplinary international group of adult and pediatric EoE researchers and clinicians reached consensus on a severity scoring index for EoE to guide practitioners in standardizing disease components reflecting disease severity beyond eosinophil counts.*

### [CLINICAL GUIDANCE FOR THE USE OF DUPILUMAB IN EOSINOPHILIC ESOPHAGITIS: A YARDSTICK](#)

*The 2020 American Gastroenterological Association (AGA) Institute and the Joint Task Force on Allergy-Immunology guideline was published before dupilumab became the first medication to gain regulatory approval in the US for the treatment of EoE. This expert opinion document provides a framework for how the clinician can consider using dupilumab in the treatment of patients with EoE.*

### [MONITORING PATIENTS WITH EOSINOPHILIC ESOPHAGITIS IN ROUTINE CLINICAL PRACTICE - INTERNATIONAL EXPERT RECOMMENDATIONS](#)

*A multidisciplinary, international group of EoE experts developed guidance on how to monitor patients with EoE in routine clinical practice.*

2020

### [AGA INSTITUTE AND THE JOINT TASK FORCE ON ALLERGY-IMMUNOLOGY PRACTICE PARAMETERS CLINICAL GUIDELINES FOR THE MANAGEMENT OF EOSINOPHILIC ESOPHAGITIS](#)

*This document, developed on behalf of the AGA Institute Clinical Guidelines Committee, presents the official recommendations of the AGA and the Joint Task Force on Allergy-Immunology Practice Parameters (JTF) on the management of eosinophilic esophagitis. The guideline provides evidence-based recommendations for allergists and gastroenterologists focusing on the clinical management of EoE for pediatric and adult patients. Update expected in 2024.*

### [TREATMENT OF EOSINOPHILIC ESOPHAGITIS \(EOE\). CLINICAL DECISION SUPPORT TOOL](#)

*Clinical decision support tool from the American Gastroenterological Association Clinical Practice Guideline.*



2018

**UPDATED INTERNATIONAL CONSENSUS DIAGNOSTIC CRITERIA FOR EOSINOPHILIC ESOPHAGITIS: PROCEEDINGS OF THE AGREE CONFERENCE**

A consensus conference concluded EoE should be diagnosed when there are symptoms of esophageal dysfunction and at least 15 eosinophils per high-power field (or approximately 60 eosinophils per mm<sup>2</sup>) on esophageal biopsy and after a comprehensive assessment of non-EoE disorders that could cause or potentially contribute to esophageal eosinophilia.



2017

**DIETARY THERAPY AND NUTRITION MANAGEMENT OF EOSINOPHILIC ESOPHAGITIS: A WORK GROUP REPORT OF THE AMERICAN ACADEMY OF ALLERGY, ASTHMA, AND IMMUNOLOGY**

A work group report addresses the potential challenges of implementing an elimination diet for the management of EoE and provides instructions and tools for physicians, dietitians, and other allied health professionals to help guide them in planning elimination diets for both children and adults.



2013

**ENDOSCOPIC ASSESSMENT OF THE OESOPHAGEAL FEATURES OF EOSINOPHILIC ESOPHAGITIS: VALIDATION OF A NOVEL CLASSIFICATION AND GRADING SYSTEM**

A system for endoscopically identified oesophageal features of EoE which defines common nomenclature and severity scores for the assessment of EoE disease activity.



**UNDERSTANDING THE PATIENT JOURNEY**

The Asthma and Allergy Foundation of America (AAFA) and the American Partnership for Eosinophilic Disorders (APFED) conducted a multicomponent cross-sectional needs assessment study for EoE. Results from the study were published in the report titled [Life with EoE: The Patient Experience and Opportunities to Improve Care in the U.S.](#) and can help payers better understand patient journey.



**COST-EFFECTIVE CARE**

**COMPONENTS OF COST-EFFECTIVE CARE IN EoE.**

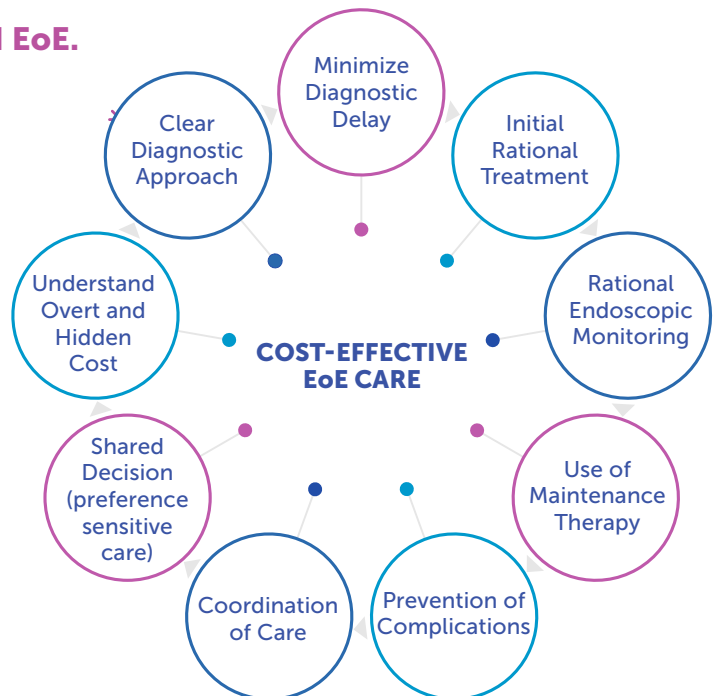


Image adapted from: Dellon ES. Cost-effective care in eosinophilic esophagitis. *Ann Allergy Asthma Immunol.* 2019 Aug;123(2):166-172.



## ADDITIONAL INFORMATION

### OTHER KEY PUBLICATIONS

[Treatment of eosinophilic esophagitis with swallowed topical corticosteroids.](#)

[Proton pump inhibitor therapy for eosinophilic esophagitis: history, mechanisms, efficacy, and future directions.](#)

[Dupilumab in adults and adolescents with eosinophilic esophagitis.](#)

*Efficacy and safety of dupilumab up to 52 weeks in adults and adolescents with eosinophilic oesophagitis (LIBERTY EoE TREET study): a multicentre, double-blind, randomised, placebo-controlled, phase 3 trial.*

### IMPACT EDUCATION CE PROGRAMMING FOR MANAGED CARE PROFESSIONALS

a. [Managed Care Review Board®: New Guidelines, Treatment Options, and Benefit Management Strategies for Eosinophilic Esophagitis](#)

- CE Expiration Date: August 31, 2027

b. [Understanding the EoE Patient Journey and Unintended Consequences](#)

- CE Expiration Date: July 31, 2027

c. [Understanding the EoE Patient Journey: Utilization Management and Treatment Guidelines](#)

- CE Expiration Date: July 31, 2027

### PATIENT-FRIENDLY RESOURCES

- [American Partnership for Eosinophilic Disorders](#): A patient advocacy organization dedicated to improving the lives of those living with eosinophilic disorders. They offer educational materials, advocacy resources, research grants and a Specialist Finder to help connect patients and providers.
- [Campaign Urging Research for Eosinophilic Disease](#): A foundation that funds research and provides resources for families. They have multiple resources to help families deal with school issues, understand tests and learn about treatment options.
- [Food Allergy & Anaphylaxis Network](#): An organization that helps families deal with food allergies. It has many resources, such as guides for schools, childcare centers, and camps, as well as other information on how to live with a food allergy.
- [Inspire](#): The EOS Connections Eosinophilic Disorders Support Community connects patients, families, friends and caregivers for support and inspiration.