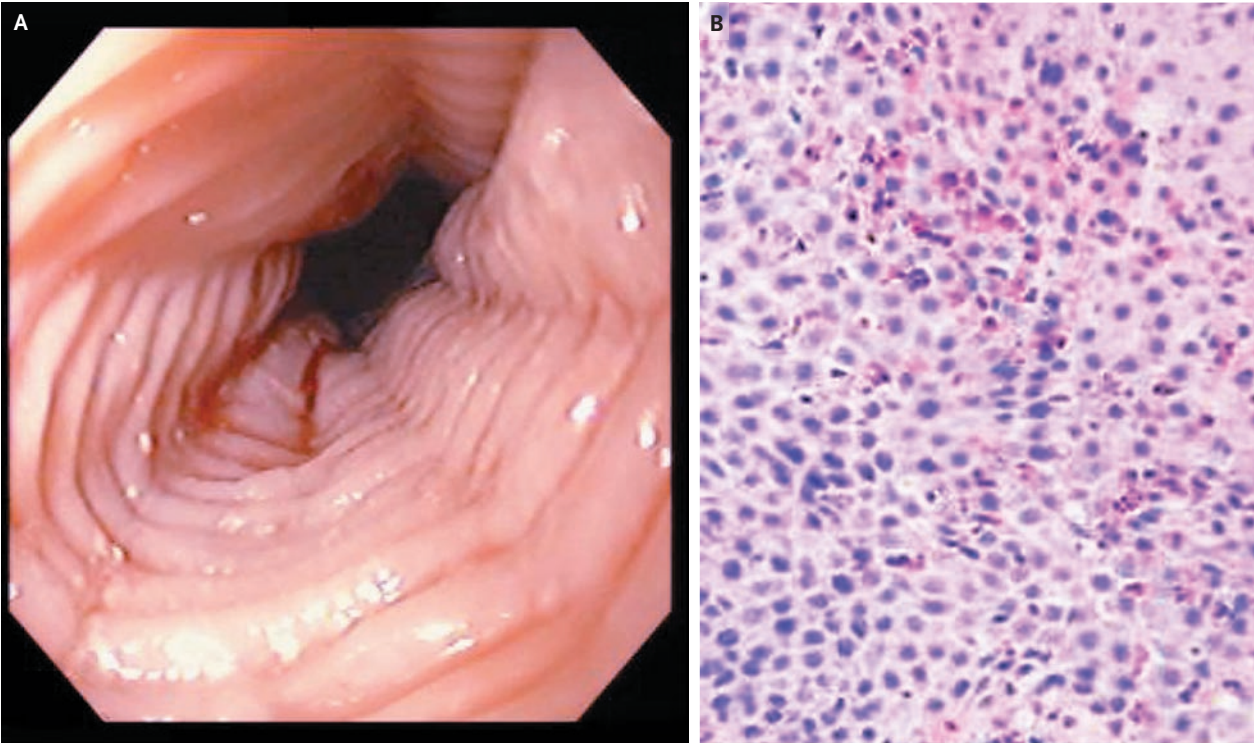


## Eosinophilic Esophagitis



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**A** 51-YEAR-OLD WOMAN WITH A HISTORY OF CHILDHOOD ASTHMA PRESENTED with a sensation of food impaction. Upper gastrointestinal endoscopy revealed classic “feline” esophagus, with mucosal rings (Panel A) and an esophageal stricture near the gastroesophageal junction. Biopsy specimens of the proximal and distal esophagus showed extensive mucosal eosinophilic infiltrates (Panel B, hematoxylin and eosin). The distal esophageal stricture was dilated with the use of a balloon dilator. The patient was treated with a fluticasone inhaler (four 220- $\mu$ g puffs twice daily), with instructions to swallow and to rinse her mouth. During the next 2 months, her symptoms diminished, and the histologic findings improved. Adult onset of eosinophilic esophagitis is still not recognized by many practitioners. This condition is often confused with gastroesophageal reflux disease and is associated with esophageal strictures. The presence of more than 20 eosinophils per high-power field in an esophageal biopsy specimen is strongly suggestive of this diagnosis. Optimal treatment remains unclear.

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