



GastroDoxs
— defenders of the digestive system —

Eosinophilic Colitis

A Practical Guide For Patients

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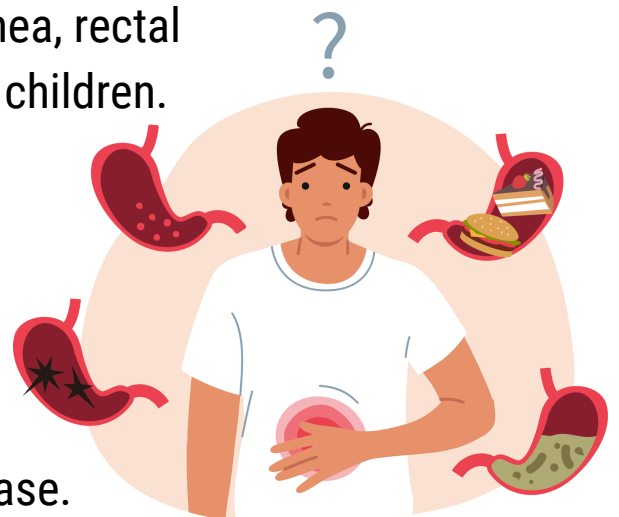


Introduction: Eosinophilic Colitis

Eosinophilic colitis (EC) is a rare form of eosinophilic gastrointestinal disorder (EGID) characterized by abnormal infiltration of eosinophils into the colon. It can occur at any age, though it is more frequently seen in infants and young adults. The clinical presentation is variable, ranging from abdominal pain, diarrhea, and weight loss to rectal bleeding and failure to thrive in children. The etiology remains unclear but is thought to involve immune dysregulation, food allergies, and environmental triggers. Diagnosis is confirmed by colonoscopic biopsy demonstrating marked eosinophilic infiltration after excluding secondary causes. Management typically includes dietary modification, corticosteroids, and other immunomodulatory therapies to control inflammation and symptoms.

Key Takeaways

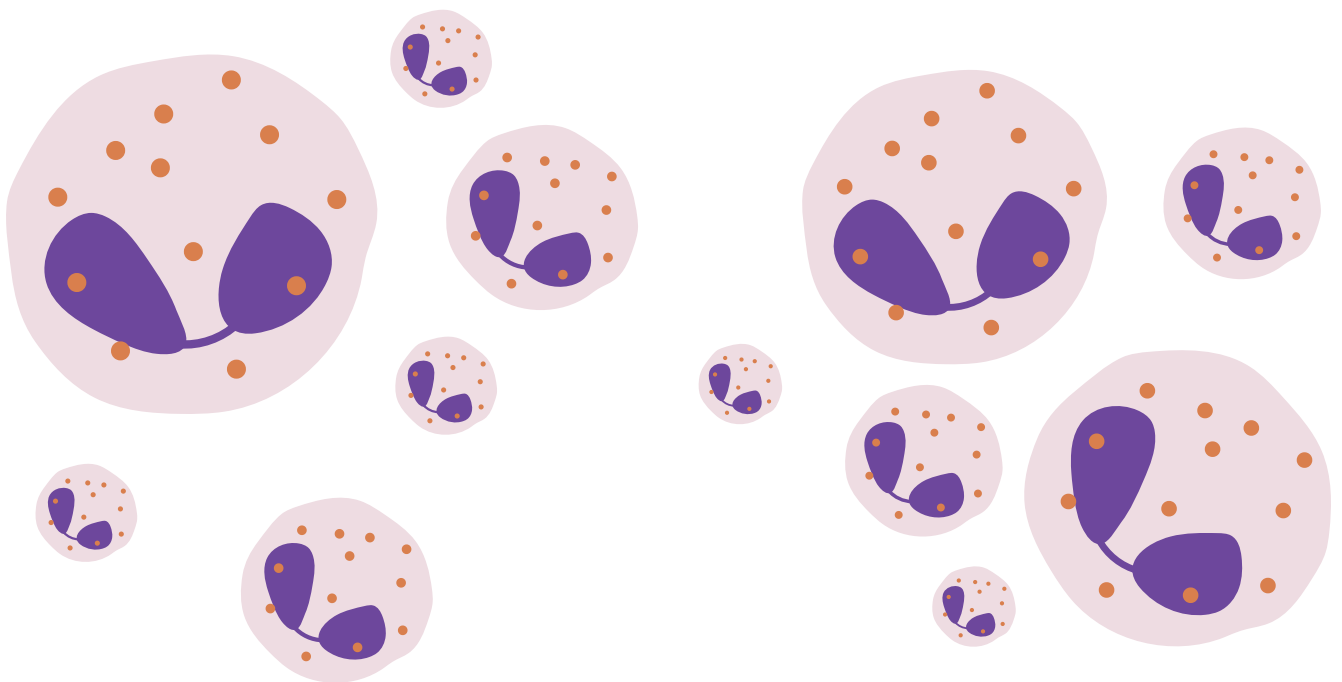
- EC is a rare eosinophilic gastrointestinal disorder characterized by eosinophilic infiltration of the colon.
- It can affect all ages but is more common in infants, children, and young adults.
- Symptoms include abdominal pain, diarrhea, rectal bleeding, weight loss, and poor growth in children.
- The exact cause is unclear but is often linked to immune dysregulation, food allergies, and environmental factors.
- Diagnosis requires colonoscopic biopsy and exclusion of secondary causes such as infections or inflammatory bowel disease.



What Causes Eosinophilic Colitis?

Known Causes

The exact cause of eosinophilic colitis (EC) is not fully understood, but it is believed to result from a combination of immune, allergic, and environmental factors. Many patients show hypersensitivity to certain foods, suggesting an allergic mechanism driven by abnormal immune responses to dietary antigens. Genetic predisposition and family history of atopic disorders, such as asthma, eczema, or allergic rhinitis, may also increase susceptibility. In some cases, environmental exposures, infections, or medications can trigger or worsen the condition. Unlike secondary eosinophilia caused by parasites or autoimmune diseases, primary EC is characterized by persistent eosinophilic infiltration of the colon, leading to chronic inflammation and gastrointestinal symptoms.



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Common Signs & Symptoms

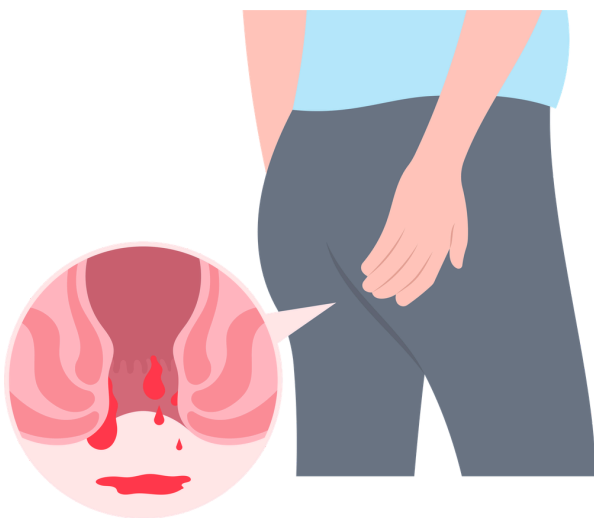
Common signs and symptoms of eosinophilic colitis include abdominal pain, diarrhea, rectal bleeding, nausea, bloating, and weight loss. In infants and children, it may also cause feeding difficulties, irritability, and poor growth due to nutrient malabsorption.

Core Symptoms Include:

- Abdominal pain or cramping
- Chronic or recurrent diarrhea
- Rectal bleeding or blood in stool
- Bloating and nausea
- Unexplained weight loss
- Feeding difficulties and poor growth in infants/children



Severe cases can also cause:



- Persistent rectal bleeding leading to anemia
- Severe abdominal pain and cramping
- Protein-losing enteropathy (loss of protein through the gut)
- Significant weight loss and malnutrition
- Growth failure in children
- Intestinal obstruction or stricture (rare)



Diagnosis & Medical Testing

Diagnosis of eosinophilic colitis involves clinical evaluation, blood tests showing elevated eosinophils, stool analysis to exclude infections, and colonoscopy with biopsy. Histological examination confirming dense eosinophilic infiltration in the colon, after ruling out secondary causes, is essential for diagnosis.

Diagnostic Tools

- Detailed medical history and symptom assessment
- Physical examination for abdominal tenderness or growth issues
- Complete blood count (CBC) to check eosinophil levels
- Serum IgE levels to assess allergic involvement
- Stool analysis for infections, parasites, or occult blood
- Fecal calprotectin to evaluate intestinal inflammation
- Colonoscopy to inspect colonic mucosa
- Colonic biopsy (gold standard) for histological confirmation
- Endoscopic imaging to assess severity and distribution
- Abdominal ultrasound to detect wall thickening or complications
- CT or MRI scans for advanced disease evaluation
- Allergy skin-prick testing for food sensitivities

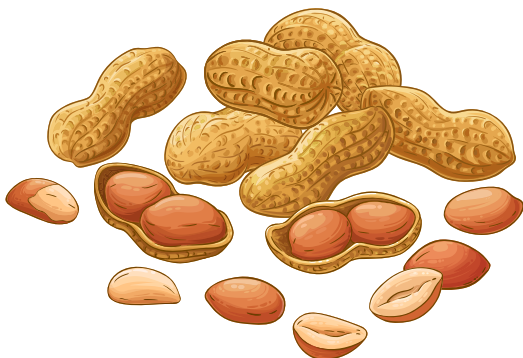


Diet

Diet plays a crucial role in managing eosinophilic colitis. Elimination diets, especially removing common allergens like milk, soy, eggs, wheat, peanuts, and seafood, can reduce inflammation. Some patients benefit from elemental or hypoallergenic formulas to control symptoms.

Key Insights

- Diet plays a central role in symptom control and inflammation reduction.
- Elimination diets target common food allergens like milk, soy, wheat, eggs, peanuts, and seafood.
- Elemental diets using amino acid–based formulas are highly effective in severe cases.
- Hypoallergenic formulas are useful for infants and children with growth concerns.
- Diet therapy can reduce or delay the need for corticosteroids.
- Nutritional monitoring is essential to prevent deficiencies.
- Individualized dietary plans work better than universal restrictions.
- A dietitian experienced in EGIDs improves safety and adherence.
- Long-term success requires balancing nutrition with symptom control.

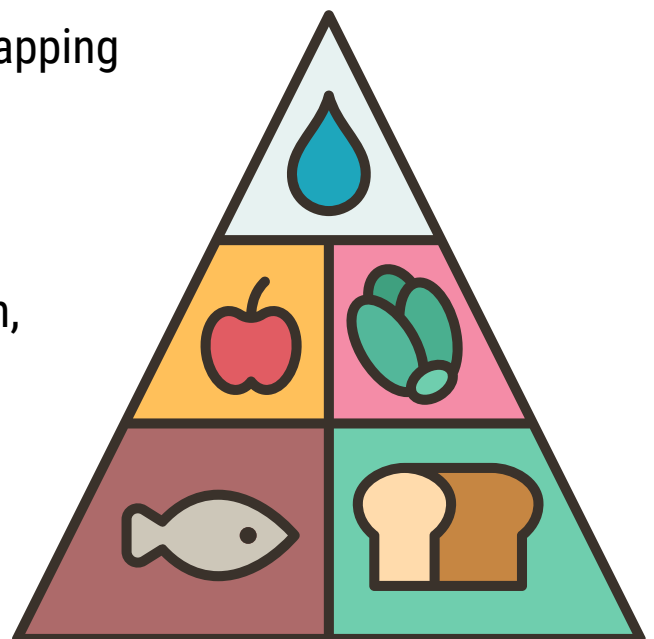


Medications & Treatment Options

Medications and treatment options for eosinophilic colitis focus on reducing inflammation and controlling symptoms. Common therapies include corticosteroids (oral or topical), antihistamines, leukotriene inhibitors, and immunomodulators. In some cases, biologic agents targeting eosinophilic activity are considered when standard treatments fail.

Treatment Options

- **Dietary management** elimination diets or elemental formulas
- **Corticosteroids** (oral, topical, or systemic) to reduce inflammation
- **Antihistamines** for allergy-related symptoms
- **Leukotriene inhibitors** (e.g., montelukast) to block inflammatory pathways
- **Immunomodulators** for persistent or severe disease
- **Biologic therapies** (e.g., anti-IL-5, anti-IL-13 agents) in refractory cases
- **Proton pump inhibitors (PPIs)** for overlapping upper GI symptoms
- **Nutritional supplementation** to prevent deficiencies
- **Supportive care** for anemia, dehydration, or malnutrition
- **Multidisciplinary approach** with gastroenterologists, allergists, and dietitians for long-term management

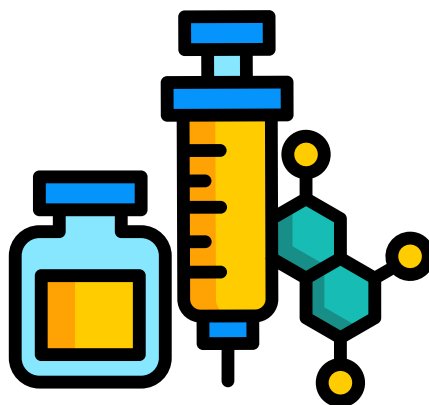


Advanced Therapies & Procedures

Advanced therapies for eosinophilic colitis include biologic agents such as anti-IL-5, anti-IL-4, and anti-IL-13 monoclonal antibodies targeting eosinophilic inflammation. In severe or refractory cases, immunosuppressants or endoscopic and surgical interventions may be required to manage complications effectively.

Therapy Options

- **Elimination diets** – removing common food allergens
- **Elemental diets** – amino acid-based formulas in severe cases
- **Corticosteroids** – systemic or topical for inflammation control
- **Antihistamines** – to reduce allergic symptoms
- **Leukotriene inhibitors** – block inflammatory mediators
- **Immunomodulators** – for chronic or resistant cases
- **Biologic therapies** – targeting IL-5, IL-4, or IL-13 pathways
- **Proton pump inhibitors (PPIs)** – for associated upper GI symptoms
- **Nutritional support** – to prevent malnutrition or deficiencies
- **Endoscopic or surgical intervention** – for severe complications like strictures or obstruction



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Coping With **Eosinophilic Colitis**

Coping with eosinophilic colitis involves a combination of medical treatment, tailored diet, and lifestyle adjustments. Regular follow-ups, stress management, and support from healthcare providers, dietitians, and patient support groups help improve daily functioning and long-term quality of life.

Practical Strategies

- Follow a **personalized elimination** or elemental diet.
- Keep a detailed **food and symptom** diary.
- Work closely with a **gastroenterologist** and dietitian.
- Take **medications** as prescribed, without skipping doses.
- **Manage stress** through relaxation techniques or mindfulness.
- **Stay hydrated** to prevent dehydration from diarrhea.
- Ensure **adequate nutrient** intake with supplements if needed.
- **Join support** groups for shared experiences and encouragement.
- Educate **family and caregivers** about dietary restrictions.
- Schedule regular medical **follow-ups** for monitoring and adjustments.



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FAQS About Eosinophilic Colitis



Q1: What is eosinophilic colitis?

A: Eosinophilic colitis is a rare inflammatory condition where eosinophils, a type of white blood cell, build up in the colon, causing gastrointestinal symptoms.

Q2: What causes eosinophilic colitis?

A: The exact cause is unclear, but food allergies, immune system dysfunction, genetic predisposition, and environmental triggers are believed to play major roles.

Q3: What are the common symptoms?

A: Symptoms include abdominal pain, diarrhea, rectal bleeding, bloating, nausea, weight loss, and poor growth in children.

Q4: How is eosinophilic colitis diagnosed?

A: Diagnosis requires medical history, blood and stool tests, colonoscopy, and confirmation through biopsy showing eosinophilic infiltration.



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Take **Action**

If you experience **Eosinophilic Colitis**, don't ignore them. Early diagnosis and treatment can prevent complications. Schedule a consultation with GastroDoxs for expert guidance on managing your digestive health.

Visit GastroDoxs.com to schedule an appointment and access more resources on digestive health.

**Your health matters
take the next step
today!**

SCHEDULE AN APPOINTMENT

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