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Eosinophilic esophagitis after an episode of herpetic esophagitis

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Dear Editor,

We present a case of eosinophilic esophagitis (EoE) after a herpetic esophagitis (HE) in order to increase the available evidence of the suggested association between these entities. This was also recently published by Iriarte Rodríguez et al. (1).

A 43-year-old immunocompetent female had an episode of HE ten years previously. Seven years later, she presented with dysphagia, heartburn and dyspepsia. Gastroscopy was performed and endoscopic signs of EoE were found, which was confirmed by a pathological sample examination.

Several cases and case series have been published in the literature that support this relationship, both in children and adults (2-5). The two entities can coexist or one precedes the other. Different theories have been postulated, depending on the temporal sequence and the treatment of EoE. On one hand, when the HE appears in an already diagnosed and untreated case of EoE, it is believed that the lack of treatment can cause an alteration in the integrity of the esophageal mucosa and facilitate the invasion of viral agents (3). In cases where HE precedes EoE, however, it is believed that herpetic infection may act as a triggering factor that generates an immune response and the development of hyper-reactivity. Or in some cases, EoE may have already existed but was not initially diagnosed, thus supporting the first theory (4). Finally, topical corticosteroids taken orally that are used for the treatment of EoE

can produce an immune deficiency that increases the risk of fungal infections and also other infectious processes (5).

We suggest that the relationship between HE and EoE is probably not random and that there are different mechanisms that can explain this phenomenon.

References

1. Iriarte Rodríguez A, Frago Marquín I, De Lima Piña GP. Informe de un caso: eosinofilia esofágica asintomática tras esofagitis por virus herpes simple. Controversias en la actitud terapéutica. *Rev Esp Enferm Dig* 2018;110(7):471-2. DOI: 10.17235/reed.2018.5508/2018.
2. Barrio Torres J, López Carreira M, Gandolfo Cano M, et al. Esofagitis herpética y eosinofílica: ¿existe alguna relación entre ambas entidades? *An Pediatr (Barc)* 2011;74(6):426-8. DOI: 10.1016/j.anpedi.2011.01.030
3. Zimmermann D, Criblez DH, Dellon ES, et al. Acute herpes simplex viral esophagitis occurring in 5 immunocompetent individuals with eosinophilic esophagitis. *ACG Case Rep J* 2016;3(3):165-8. DOI: 10.14309/crj.2016.38
4. Squires KA, Cameron DJ, Oliver M, et al. Herpes simplex and eosinophilic oesophagitis: the chicken or the egg? *J Pediatr Gastroenterol Nutr* 2009;49(2):246-50. DOI: 10.1097/MPG.0b013e31817b5b73
5. Frit J, Lerner D, Suchi M. Herpes simplex virus esophagitis in immunocompetent children: a harbinger of eosinophilic esophagitis? *J Pediatr Gastroenterol Nutr* 2018;66(4):609-13. DOI: 10.1097/MPG.0000000000001748