

Title:

Clinical, endoscopic and histological characteristics of Mexican adult patients with eosinophilic esophagitis

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Clinical, endoscopic and histological characteristics of Mexican adult patients with eosinophilic esophagitis

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Dear editor,

Eosinophilic esophagitis (EoE) has high prevalence/incidence in Western Europe, Canada, United States of America and Australia where it has significantly increased over the past three decades to the extent that some consider it an epidemic (1,2). In Mexico and Latin America it is uncommon. Few prevalence studies conducted in Mexico, showed a prevalence of 1.4% in patients referred for esophagogastroduodenoscopy (EGD) (3) and 4% in those with refractory gastro esophageal reflux disease (GERD) (4). These numbers are lower than those reported in Caucasians. Due to this, its clinical characteristics have



not been defined. We studied thirty-eight adult patients with EoE referred to 2 centers in the northeast of Mexico, from 2007 to 2021. The mean age was 40.3 ±15.5 years, 65.8% were male and 60.5% had atopic history. The 68.4% showed dysphagia, 71.1 % typical symptoms of GERD (heartburn/regurgitation) and esophageal food impaction in only 18.4%. The duration of the symptoms before diagnosis was from 4 to 20 years. At endoscopy, 68.4 % showed at least one of the typical signs of EoE. Histological examination of esophageal mucosa reported a mean eosinophil count of 38.1±18.8/ HPF and sub epithelial fibrosis in 11.4%. The 36.8% showed Helicobacter *pylori (Hp)* infection in gastric mucosal biopsy.

This study, conducted with the greatest number of EoE adult patients in Mexico and Latin America up to now, suggests that it is an uncommon disease among our population and that patients have similar risk factors to those of Caucasians (age, gender and atopy). They had less *Hp* infection compared to the reported in open Mexican population (66%) (5). In contrast, the higher frequency of GERD symptoms, and lesser esophageal food impaction as first symptom may suggest that an attenuated phenotype of EoE predominates in Hispanic population. The causes of these disparities remain to be cleared.

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