

## Fluticasone improves histologic eosinophilia in esophagitis

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(HealthDay) -- Swallowing aerosolized fluticasone improves histologic eosinophilia but does not improve dysphagia symptoms in adults with eosinophilic esophagitis (EoE), according to a study published online in the July issue of *Clinical Gastroenterology and Hepatology*.

To determine whether aerosolized fluticasone therapy improved symptomatic <u>dysphagia</u> and histologic eosinophilia, Jeffrey A. Alexander, M.D., of the Mayo Clinic College of Medicine in Rochester, Minn., and colleagues conducted a randomized, double-blind, placebo-controlled trial involving adults (mean age, 37.5 years) with a new diagnosis of EoE. For six weeks, patients either swallowed 880 μg of aerosolized fluticasone (21 participants) or used a placebo inhaler twice daily (15 participants).

The researchers found that 62 percent of fluticasone-treated patients showed a complete histologic response, defined as a >90 percent reduction in mean eosinophil count, compared with none in the placebo group, in intention-to-treat analysis. In per-protocol analysis, 68 versus 0 percent had a histologic response. Eighty-one

versus 8 percent of fluticasone- versus placebotreated patients exhibited reduced eosinophilderived neurotoxin staining. Dysphagia was reduced in 57 and 33 percent of patients treated with fluticasone and placebo, respectively (P = 0.22), in intention-to-treat analysis, and in 63 and 47 percent, respectively (P = 0.49), in per-protocol analysis. Esophageal candidiasis developed in 26 percent of fluticasone-treated patients and no patients in the placebo group.

"In summary, this double-blind, placebo-controlled six-week trial of aerosolized fluticasone in the treatment of EoE found the treatment efficacious at decreasing esophageal eosinophilia and eosinophil activity," the authors write. "This histologic response, however, was not accompanied by a relief of symptomatic dysphagia."

One author disclosed financial ties to Meritage Pharmacia.

**Abstract** 

**Full Text** 

**Editorial** 

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