



**American Partnership for Eosinophilic
Disorders**
P.O. Box 29545
Atlanta, GA 30359
www.apfed.org

Eosinophil-associated Diseases

FACT SHEET

A group of uncommon chronic illnesses, eosinophil (E-o-'si-n-o-'fil)- associated diseases, are rapidly emerging as a healthcare problem worldwide. Yet, many patients suffering from these disorders go undiagnosed for years due to a lack of information or awareness of these diseases.

What is an Eosinophil?

A type of white blood cell associated with allergies, parasites, and cancers.

What are Eosinophil-associated Diseases?

- High numbers of eosinophils accumulate in body tissues causing inflammation and damage
- Classified by body tissue where eosinophils accumulate
- Diagnosed and monitored by tissue biopsies
- Chronic diseases requiring long term treatment, with no known cure
- Debilitating diseases leading to missed work, school, social outings
- Delays in diagnosis are common

Eosinophilic Esophagitis (EoE)

- Causes inflammation and damage to the esophagus, affecting the ability to eat
- Estimated prevalence of roughly 1 in 1,800
- Increasing in prevalence over the past 10 years
- Patients may depend on steroids or medical nutrition therapy, sometimes through a feeding tube

Eosinophilic Colitis (EC)

- Causes inflammation and damage to the large intestine (colon)
- May be misdiagnosed as Irritable Bowel Syndrome (IBS) or Inflammatory bowel disease
- Patients may require restricted diet therapy, elemental formula or chronic steroids



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Eosinophilic Gastroenteritis (EGE), and Eosinophilic Gastritis (EG)

- Causes inflammation and damage to the stomach and/or small intestine, often misdiagnosed
- Estimated prevalence of EGE and EC combined is 1 per 3500
- Causes severe abdominal pain, forceful vomiting and/or diarrhea
- Treatment may involve a limited diet, feeding tube and/ or steroids

Hypereosinophilic Syndrome (HES)

- Diagnosed by very high numbers of eosinophils in the blood and tissue
- Causes potentially fatal damage to one or more organs in the body (heart, lungs, gut, skin)

Eosinophilic Granulomatosis with Polyangiitis (Churg-Strauss Syndrome)

- Eosinophils cause damage to small to medium blood vessels (vasculitis)
- Patient may initially be diagnosed with severe asthma
- Causes potentially fatal lung, heart, brain or gastrointestinal damage
- Estimated prevalence is approximately 5 cases per million people per year, with a rate in asthmatics of as high as 80 cases per million per year.

Eosinophilic Fasciitis

- Eosinophils build up in the connective tissues that surround muscles, nerves, and blood vessels.
- Arms and legs are primarily affected. Symptoms often include pain, swelling, and thickened and pitted skin that resembles an orange peel.
- While symptoms typically resolve on their own, some cases require corticosteroids and immune-suppressing medications. In many cases, EF resolves in a few years, however, some people have reported symptoms for longer than 5 years, or have reported symptoms resolved and then returned later.

Eosinophilic Cystitis

- Eosinophils cause injury and inflammation to the bladder.
- Reported to be more common in males, and may affect both adults and children.
- Symptoms may include painful urination, blood in urine, and pain in the lower abdomen.

About APFED

- 501(c)3 non-profit patient advocacy organization for those living with eosinophil-associated diseases
- Mission is to passionately embrace, support, and improve the lives of patients and families affected by eosinophil-associated diseases through education and awareness, research, support, and advocacy.
- Raises funds for research of eosinophil-associated diseases through competitive peer-reviewed grant program.