

# The practicalities of eosinophilic oesophagitis management: A closer look at emerging biologic treatment options



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## Expert panel



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# Agenda

**EoE in children and adults: What are the similarities and differences?**

**Caring for children with EoE: How can we manage the transition to adult services?**

**Treating children and adults with EoE: What do the latest data show?**



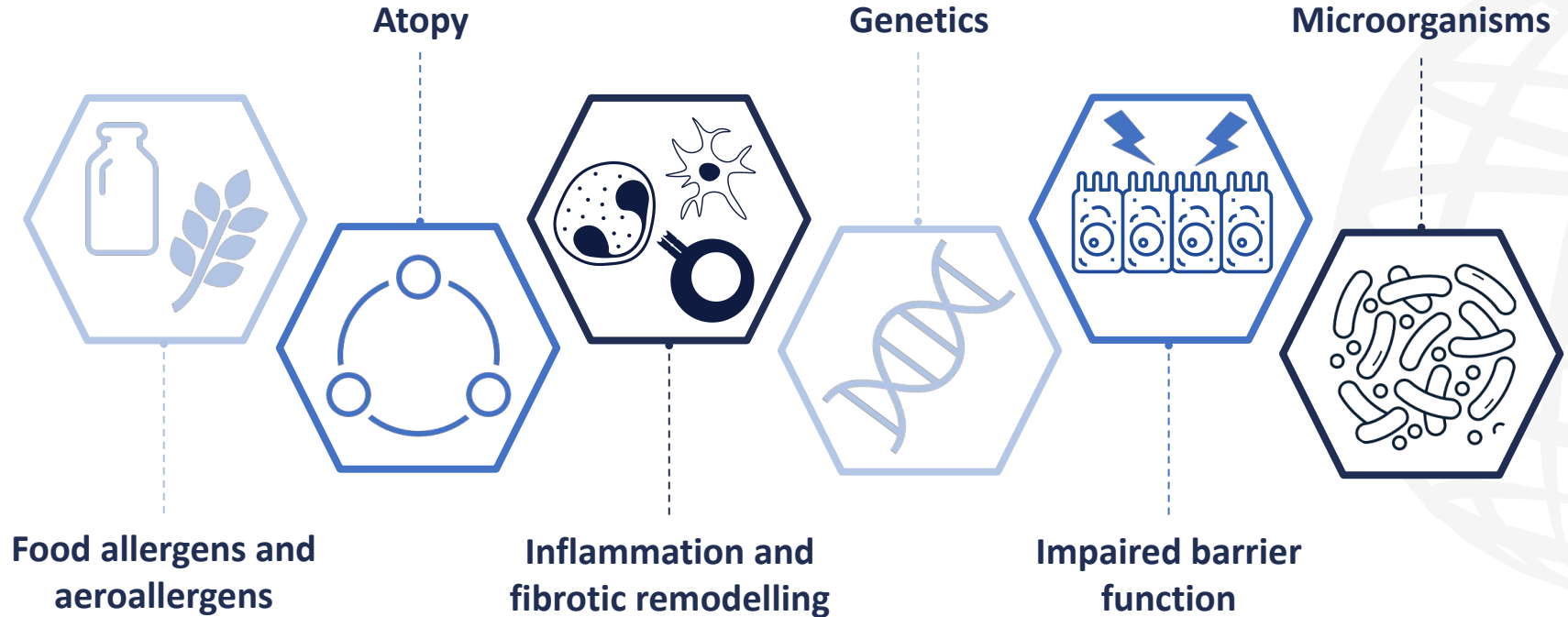
# EoE in children and adults: What are the similarities and differences?

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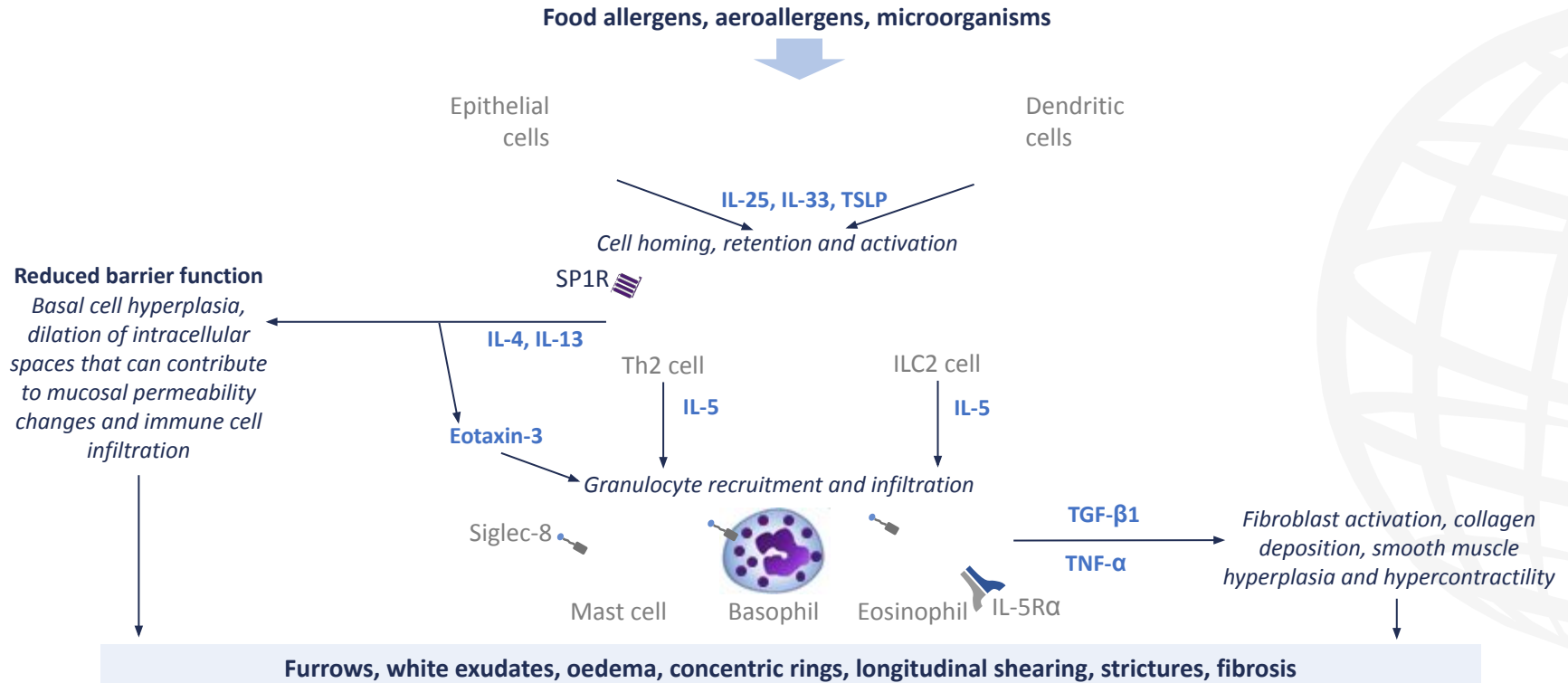
# Underlying mechanisms of EoE development<sup>1,2</sup>



EoE, eosinophilic oesophagitis.

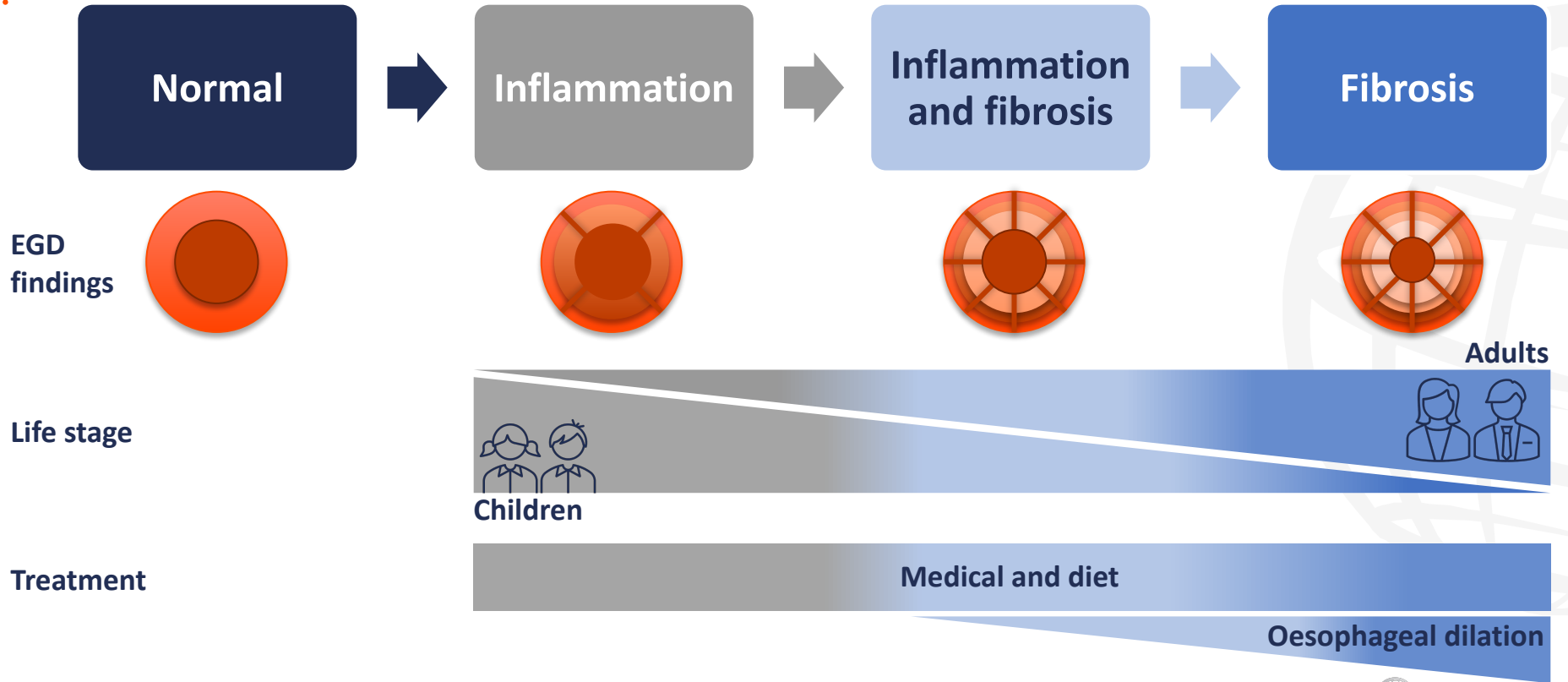
1. Muir A, Falk GW. *JAMA*. 2021;326:1310–8; 2. Racca F, et al. *Front Physiol*. 2022;12:815842.

# EoE pathophysiology overview<sup>1-5</sup>



EoE, eosinophilic esophagitis; IL, interleukin; IL-5R $\alpha$ , IL-5 receptor  $\alpha$ ; ILC2, type 2 innate lymphoid cells; Siglec-8, sialic acid-binding Ig-like lectin 8; SP1R, sphingosine-1-phosphate receptor; TGF- $\beta$ , transforming growth factor- $\beta$ ; Th2, T-helper cell type 2; TNF- $\alpha$ , tumour necrosis factor- $\alpha$ ; TSLP, thymic stromal lymphopoietin.  
 1. Muir A, Falk GW. *JAMA*. 2021;326:1310-8; 2. Racca F, et al. *Front Physiol*. 2022;12:815842; 3. Furuta GT, Katzka DA. *N Engl J Med*. 2015;373:1640-8; 4. Hill DA, Spergel JM. *J Allergy Clin Immunol*. 2018;142:1757-8; 5. Lam AY, et al. *Curr Opin Pharmacol*. 2022;63:102183.

# EoE as a continuum from inflammation to fibrosis







# Caring for children with EoE: How can we manage the transition to adult services?

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# Many patients with EoE are lost to follow-up



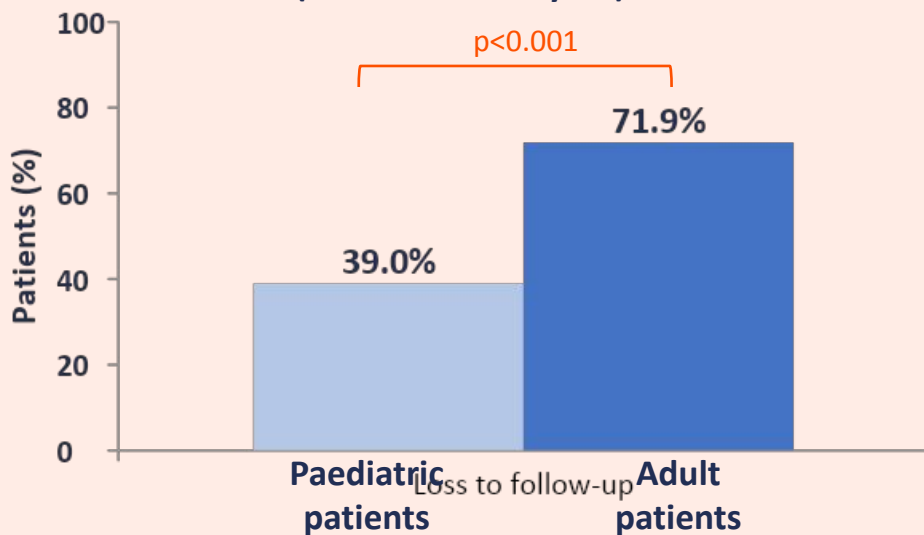
Retrospective chart review of patients with EoE at a tertiary care medical centre



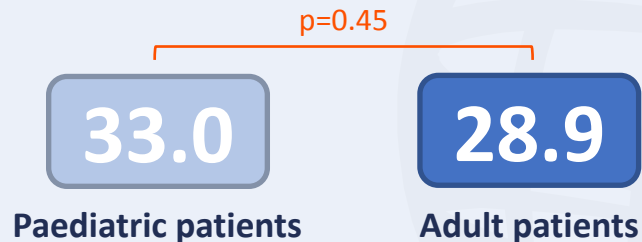
N=177 patients with EoE:

- n=41 children (<21 years)
- n=136 adults (>21 years)

Proportion of patients with EoE lost to follow-up (not seen for >1 year)



Median length of follow-up (months)



Findings underscore the importance of effective transition of care, and ensuring patients engage with ongoing management and follow-up

# Transition of care: Patient and provider responsibilities



## Patient responsibilities

- Know disease name and medications<sup>1</sup>
- Understand treatments, procedures and risk of non-adherence or loss to follow-up<sup>1</sup>
- Participate in decision making<sup>1</sup>
- Assume responsibility for own care, e.g. appointments, prescriptions<sup>1</sup>

## Paediatric provider responsibilities

- Introduce transfer of care<sup>1,2</sup>
- Develop individualized care transition plan<sup>1,3</sup>
- Address misunderstandings<sup>2</sup>
- Identify psychological, social or economic issues<sup>2</sup>
- Ongoing assessment of transition readiness; \* identify and address areas for improvement<sup>1,3</sup>
- Promote self-management skills<sup>2</sup>
- Discuss individualized care plan and simplified treatment regimen<sup>2</sup>
- Continue or establish care with adult sub-specialists, e.g. allergists and dietitians<sup>1</sup>
- Discuss implications of EoE for education and work<sup>2</sup>

## Adult provider responsibilities

- Joint review of patient case<sup>1,3</sup>
- Joint visits with paediatric and adult gastroenterologists, allergists and dietitians<sup>1,3</sup>
- Transfer to adult clinic<sup>1,3</sup>
- Assume and continue care<sup>3</sup>

\*Includes understanding medical condition, knowledge of medications, obtaining refills, scheduling appointments, maintaining health records and functioning independently in the health care setting.<sup>3</sup>

EoE, eosinophilic oesophagitis.

1. Hiremath G, et al. *Trans Sci Rare Dis.* 2022;6:13–23; 2. Roberts G, et al. *Allergy.* 2020;75:2734–52; 3. Dellon ES, et al. *Dis Esophagus.* 2013;26:7–13.

# Treating children and adults with EoE: What do the latest data show?

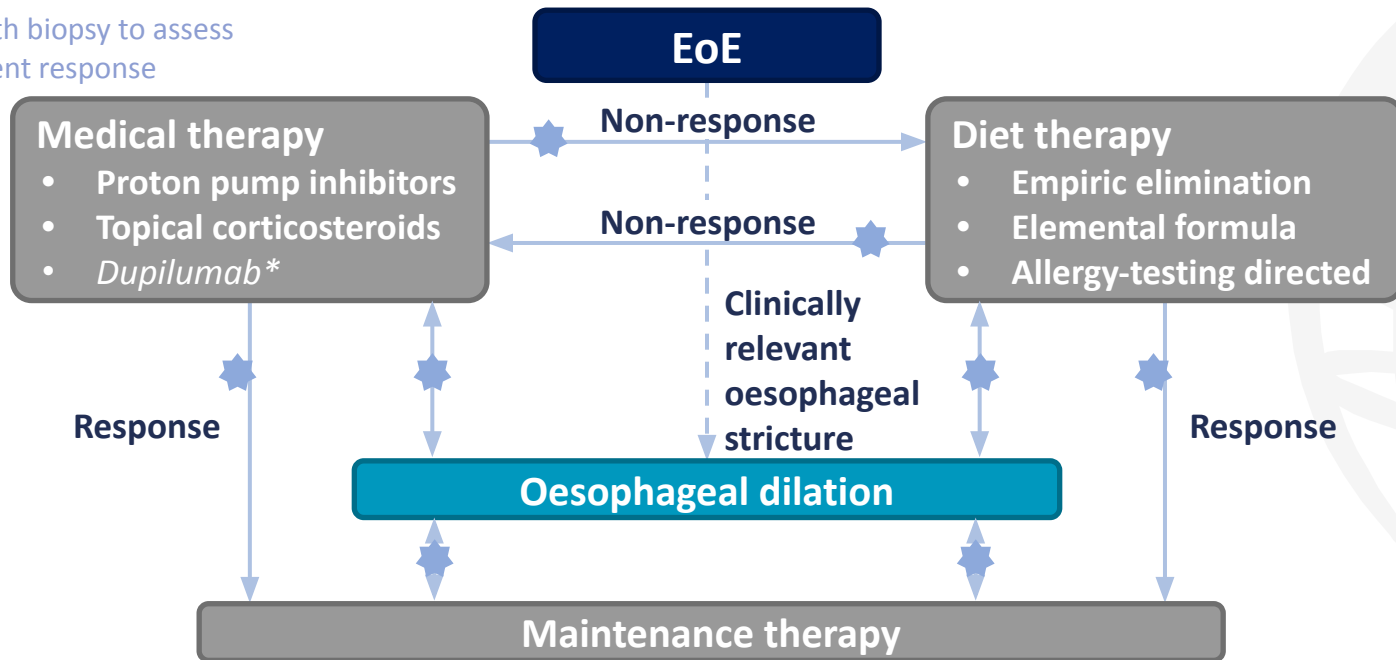
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# Treatment of patients with EoE: Clinical decision support tool<sup>1-5</sup>

★ EGD with biopsy to assess treatment response



\*Dupilumab is approved by the FDA to treat patients with EoE aged 12 years and older, weighing at least 40 kg. Dupilumab is currently under EMA/CHMP review. CHMP, Committee for medicinal products for human use; EGD, oesophagogastroduodenoscopy; EMA, European Medicines Agency; EoE, eosinophilic oesophagitis. 1. Hirano I, et al. *Gastroenterology*. 2020;158:1776–86; 2. Rank MA, et al. *Gastroenterology*. 2020;158:1789–810; 3. Rank MA, et al. *Ann Allergy Asthma Immunol*. 2020;124:424–40; 4. Hirano I, et al. *Ann Allergy Asthma Immunol*. 2020;124:416–23; 5. FDA. Dupilumab prescribing information 2022. Available at: [www.accessdata.fda.gov/drugsatfda\\_docs/label/2022/761055s040lbl.pdf](http://www.accessdata.fda.gov/drugsatfda_docs/label/2022/761055s040lbl.pdf) (accessed 7 June 2022).

# Selected agents in development targeting EoE pathophysiology

Study details  
**Estimated completion**

**Cendakimab (IL-13)<sup>1,2</sup>**  
 NCT05175352  
 Age 18 to 75 years  
 March 2024

**Etrasimod (SP1R)<sup>1,2</sup>**  
 NCT04682639 (VOYAGE)  
 Age 18 to 65 years~  
 May 2023

**Cendakimab (IL-13)<sup>1,2</sup>**  
 NCT04753697; NCT04991935  
 Age 12 to 75 years  
 July 2024; August 2026

**Dupilumab (IL-4R $\alpha$ /IL-13)<sup>1,2</sup>**  
 NCT04394351 (EOE KIDS)  
 Age 1 to 11 years  
 April 2023

**Dupilumab (IL-4R $\alpha$ /IL-13)<sup>1,2</sup>**  
 NCT03633617 (LIBERTY EoE TREET)  
 Age  $\geq$ 12 years  
 July 2022

**Mepolizumab (IL-5)<sup>1,2</sup>**  
 NCT03656380  
 Age 16 to 75 years  
 July 2022

**Lirentelimab (siglec-8)<sup>1,2</sup>**  
 NCT04322708 (KRYPTOS)  
 Age  $\geq$ 12 and  $\leq$ 80 years  
 May 2022

**Benralizumab (IL-5R $\alpha$ )<sup>1,2</sup>**  
 NCT04543409 (MESSINA)  
 Age  $\geq$ 12 and  $\leq$ 65 years  
 May 2024

**Dupilumab (IL-4R $\alpha$ /IL-13)<sup>1,2</sup>**  
 NCT05247866  
 Age 6 to 25 years  
 September 2025

EoE, eosinophilic oesophagitis; IL, interleukin; IL-4/13R, IL-4/13 receptor; IL-5R, IL-5 receptor; IL-5R $\alpha$ , IL-5 receptor  $\alpha$  subunit; ILC2, type 2 innate lymphoid cells; siglec-8, sialic acid-binding Ig-like lectin 8; SP1R, sphingosine-1-phosphate receptor; TGF- $\beta$ , transforming growth factor- $\beta$ ; Th2, T-helper cell type 2; TNF- $\alpha$ , tumour necrosis factor- $\alpha$ ; TSLP, thymic stromal lymphopoietin.

1. Racca F, et al. *Front Physiol.* 2022;12:815842; 2. ClinicalTrials.gov. Available at: <https://clinicaltrials.gov/ct2/home> (accessed 19 May 2022).