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**Research Suggests Eosinophilic Esophagitis Is a Late Manifestation of the Atopic March**

Researchers will present their findings that eczema, food allergy and asthma independently and cumulatively increase the risk of eosinophilic esophagitis at the 2018 AAAAI/WAO Joint Congress.

Orlando, FL – Scientists are presenting information at the 2018 American Academy of Allergy, Asthma & Immunology (AAAAI) and World Allergy Organization Joint Congress that suggests eosinophilic esophagitis (EoE) could be predicted using a common theory related to other allergic diseases: the atopic march.

The atopic march describes how patients who have an allergic disease are more likely to develop another or multiple allergic diseases in their lifetime. This progression commonly starts with eczema in infancy and can develop into food allergy, asthma or hay fever in childhood. Now, new research being presented at the Joint Congress provides evidence that EoE is a late but probable part of this disease progression.

The researchers looked at the rate of EoE and its association to other allergic diseases in a cohort of 130,457 children. They found that children with eczema, food allergy or asthma all had a greater risk of developing EoE than children without the conditions.

“The cumulative risk of EoE also went up with each subsequent atopic, or allergic, disease,” said author Jonathan M. Spergel, MD, PhD, FAAAAI. “Our findings indicate that EoE falls into the pattern of atopic march, although EoE tends to be diagnosed later in the progression.”

As previously mentioned, the atopic march usually begins with eczema, which on average is diagnosed when the infant is around 5 months-old.

“Infants with eczema are more likely to be diagnosed with food allergy or asthma when they are about a year-old,” said Spergel. “If a child was diagnosed with all three conditions, they are even more likely to develop EoE than if they only had one or two other conditions.”

Regardless of the atopic march, children who are male and Caucasian were more at risk for EoE than other groups.

To learn more about [EoE](#) or [the atopic march](#), visit [aaaai.org](http://aaaai.org). Research presented at the AAAAI/WAO Joint Congress, March 2-5 in Orlando, Florida, is published in an [online supplement to \*The Journal of Allergy and Clinical Immunology\*, an official journal of the AAAAI.](#)

The American Academy of Allergy, Asthma & Immunology ([AAAAI](#)) represents allergists, asthma specialists, clinical immunologists, allied health professionals and others with a special interest in the research and treatment of allergic and immunologic diseases. Established in 1943, the AAAAI has more than 7,000 members in the United States, Canada and 72 other countries. The AAAAI's [Find an Allergist/Immunologist](#) service is a trusted resource to help you find a specialist close to home.

The World Allergy Organization ([WAO](#)) is an international alliance of 97 regional and national allergy, asthma, and immunology societies. Through collaboration with its Member Societies WAO provides a wide range of educational and outreach programs, symposia and lectureships to allergists/immunologists around the world and conducts initiatives related to clinical practice, service provision, and physical training in order to better understand and address the challenges facing allergists/immunologists worldwide.

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