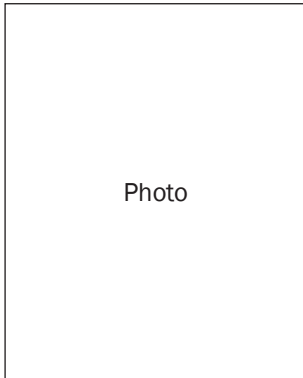


ACTION PLAN FOR Eosinophilic Oesophagitis (EoE)



Name: _____

Date of birth: _____



Confirmed or suspected food triggers
to avoid:

Family/emergency contact name(s):

1. _____

Mobile Ph: _____

2. _____

Mobile Ph: _____

Plan prepared by clinical immunology/
allergy specialist or gastroenterologist.

Name: _____

Signed: _____

Date: _____

This plan is for the emergency treatment of food impaction and food bolus obstruction (FBO), due to eosinophilic oesophagitis (EoE).

- Eosinophilic oesophagitis (EoE) is an inflammatory condition of the food pipe (oesophagus) that connects the mouth to the stomach.
- Food impaction/food bolus obstruction (FBO) occurs when food gets stuck in the oesophagus.

Treatment options for EoE include: proton pump inhibitor medication, swallowed corticosteroids and dietary modification. Additional treatments for food impaction/FBO include oral nitroglycerin, oral salbutamol, carbonated (fizzy) fluid and removal of the food by endoscopy.

Adrenaline (epinephrine) injectors and antihistamines do not play a role in the management of EoE.

SIGNS OF EOE

- Trouble swallowing
- Abdominal (stomach) pain, nausea or vomiting
- Regurgitation of foods, choking or gagging on food
- Chest pain when eating, severe acid reflux (heartburn) that does not respond to medications

ACTION FOR EOE

- Phone family/emergency contact
- Give medications (if prescribed) _____
- Observe for progression to a food impaction/food bolus obstruction (FBO)

SIGNS OF FOOD IMPACTION/FBO

- Food getting stuck on the way down the oesophagus
- Pain or sensation of squeezing in the chest or in the oesophagus
- Unable to swallow
- Feeling the need to spit out saliva or drool

ACTION FOR FOOD IMPACTION/FBO

- Phone family/emergency contact
- Phone ambulance 000 (AU) or 111 (NZ) or take person to an emergency department if:
 - The food has not passed down within 1 - 2 hours, or
 - Chest pain is severe and talking or breathing is difficult.

Note: Food impaction/FBO can sometimes pass with time and sipping water or carbonated (fizzy) drink may help to dislodge the food.

Some people with EoE may also have a food allergy and be at risk of anaphylaxis to other foods. They will have a separate ASCIA Action Plan for Anaphylaxis for this food allergy.

Additional instructions: _____
