

Comment to case report on eosinophilic gastroenteritis

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The case report by Verheijden and Ennecker-Jans on eosinophilic gastroenteritis¹ is highly appreciated. We would like to add a word of caution in view of the potential dangers of indiscriminate initiation of steroid therapy. It is necessary to exclude latent tuberculosis and strongyloides infection in subjects at risk.²⁻⁵ Travel history, insufficiently treated infections and abnormalities on the chest X-ray may be indicative. Reactivation of tuberculosis and strongyloides hyperinfection syndrome may lead to life-threatening complications. Clinical symptoms and radiographic findings are characteristically atypical; peripheral blood eosinophilia can be absent in strongyloides hyperinfections.

Testing prior to initiation of immunosuppressive treatment preferably by interferon- γ release assays (IGRAs)^{6,7} and strongyloides serology is easy and highly sensitive.⁵

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