

Enrique La Orden Izquierdo¹, Sonia Fernández Fernández², Josefa Barrio Torres³, M^a Luz Cilleruelo Pascual⁴, Carolina Gutierrez Junquera⁴, Gonzalo Botija Arcos⁵, Enrique Medina Benitez⁶, Beatriz Martínez Escribano³, Luis Grande Herrero⁷, Ana I. Rayo Fernández², Gloria Rodrigo García⁸, Enrique Salcedo Lobato⁹, Carmen Miranda Cid⁸, Myriam Herrero Álvarez¹⁰, Nieves Romero Hombrebueno¹¹, Mercedes Sebastián Planas¹², Ignacio Macillo Fernández¹³, Javier Subiza Garrido Lestache¹⁴, Pedro Urruzuno Tellería⁶, Alfonso Barrio Merino¹⁵, Javier Manzanares López-Manzanares⁶, Enriqueta Román Riechmann⁴

¹Hospital Universitario Infanta Elena, Paediatric Gastroenterology Unit, Valdemoro, Madrid, Spain

²Hospital Universitario Severo Ochoa, Paediatric Gastroenterology Unit, Leganés, Madrid, Spain

³Hospital Universitario de Fuenlabrada, Paediatric Gastroenterology Unit, Fuenlabrada, Madrid, Spain

⁴Hospital Universitario Puerta de Hierro-Majadahonda, Pediatric Gastroenterology Unit, Majadahonda, Madrid, Spain

⁵Hospital Universitario Fundación de Alcorcón, Paediatric Gastroenterology Unit, Alcorcón, Madrid, Spain

⁶Hospital Universitario 12 de Octubre, Paediatric Gastroenterology, Madrid, Spain

⁷Hospital Universitario de Getafe, Paediatric Gastroenterology Unit, Getafe, Madrid, Spain

⁸Hospital Universitario Infanta Cristina, Paediatric Gastroenterology Unit, Parla, Madrid, Spain

⁹Hospital Universitario Doce de Octubre, Paediatric Gastroenterology, Madrid, Spain

¹⁰Hospital Universitario Rey Juan Carlos, Paediatric Gastroenterology Unit, Mostoles, Madrid, Spain

¹¹Hospital Universitario del Tajo, Paediatric Gastroenterology Unit, Aranjuez, Madrid, Spain

¹²Hospital Universitario de Móstoles, Paediatric Gastroenterology, Móstoles, Madrid, Spain

¹³Hospital Universitario Fundación Jiménez Díaz, Epidemiology and Biostatistics, Madrid, Spain

¹⁴Clinica Subiza, Allergy and Clinical Immunology, Madrid, Spain

¹⁵Hospital Universitario Fundación Alcorcón, Paediatric Gastroenterology Unit, Alcorcón, Madrid, Spain

Pollen count and incidence of oesophageal eosinophilia in southwestern area of the region of Madrid: is there a relationship?

Objectives and study: This study aimed to determine the incidence of oesophageal eosinophilia in southwestern area of the region of Madrid, analyzing the relationship between eosinophilia and the most common pollens measured in annual absolute counts (*Olea*, *Platanus*, *Poaceae*, *Artemisia*, *Urticaceae*, *Cupressaceae* and *Quercus*) and seasonal variations in these pollen counts. We hypothesized that a relationship between them could exist in addition to other environmental factors.

Methods: A multi-center retrospective observational descriptive study of the incidence of oesophageal eosinophilia in children aged under 15 years in the southwestern area of the region of Madrid. 254 cases diagnosed with confirmed oesophageal eosinophilia based on standard clinicopathologic criteria between 2002 and 2013 were included. The clinical data collected include age, sex, clinical presentation and diagnosis date. To test for statistical significance, the relative risk (RR) estimate was performed using negative binomial regression models to assess the association between seasonal incidence, pollen counts and respective time of pollination of each type of pollen analysed (data from Subiza Clinic and Red PalinoCAM). All statistical analyses were performed with Stata v.11 software.

Results: 192 were male (75.6%), age range 6 months to 14.99 years old (median 9). Symptoms at presentation were: oesophageal impaction 23.6% (n=60); dysphagia 22%

(n=56); gastroesophageal reflux-like symptoms 44.9% (n=114); abdominal pain, faltering growth and others 4.3% (n=11); 5.1% were asymptomatic (n=13). We estimated the incidence of cases per 100,000 under 15 year old children / year (from 2002-2013): 0.81; 1.5; 0.37; 3.17; 3.07; 4.36; 6.87; 7.19; 8.38; 9.05; 9.14; 9.68. The overall analysis of the relationship between the oesophageal eosinophilia incidence and absolute counts of pollen types analysed both annually and at times of pollination revealed a RR> 1 for all pollens, though only *Platanus* showed a statistically significant difference ($p < 0.05$).

Conclusion: The average incidence of oesophageal eosinophilia in our region has increased by 19% each year between 2002 and 2013. The characteristics of age, sex and clinical presentation presented here are consistent with those of other reports. This increase may be related to *Platanus* pollen counts (among other environmental factors), with higher incidence occurring during pollination. According to this model, a 9.8% increase in the risk of developing oesophageal eosinophilia is expected for every 1,000 unit increase in *Platanus* pollen counts.

Disclosure of interest: None Declared.

ESPGHAN 49th ANNUAL MEETING of the European Society for Paed...

Journal of Pediatric Gastroenterology & Nutrition: [May 2016 - Volume 62 - Issue page 300](#)