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Summary

CAN WE AVOID REPEAT ENDOSCOPIES? SERUM EDN AS A NON-INVASIVE BIOMARKER FOR DISEASE ACTIVITY IN EOSINOPHILIC ESOPHAGITIS

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Mechanisms & Personalised Medicine | Small Intestine & Nutrition | Immunology | Endoscopy | Oesophagus

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Serum eosinophil-derived neurotoxin (EDN) is a promising non-invasive biomarker for distinguishing active from remission eosinophilic esophagitis, with an optimal cutoff of 17 µg/mL achieving 90% sensitivity and 75% specificity.

KEY POINTS

- In a prospective study of 62 participants (23 active EoE, 27 remission EoE, 12 healthy controls), serum EDN showed the greatest discriminative ability for active versus remission disease with an AUC of 0.83.
- The optimal serum EDN cutoff of 17 µg/mL distinguished active from remission EoE with 90% sensitivity and 75% specificity.
- Active EoE patients had significantly higher serum EDN (p=0.002), ECP (p=0.024), IL-13 (p=0.046), and IL-8 (p=0.039) compared with remission patients.
- Combining EDN with clinical symptoms improved discrimination further, achieving an AUC of 0.85.
- Esophageal biopsies from EoE patients showed higher EDN (p=0.05) and IL-1β (p=0.03) expression compared with healthy controls.
- Serum EDN may offer a non-invasive alternative to serial endoscopy for monitoring disease activity in routine clinical practice.

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