

Allergy drug found to clear condition but not symptoms of throat disease

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A group of Mayo Clinic researchers conducted the first controlled trial of swallowed fluticasone nasal spray (also known as Flonase) on people with the allergic esophageal condition called eosinophilic esophagitis. Research showed that the aerosolized swallowed allergy drug helped treat the cause of the throat condition, but symptoms lingered. The researchers' findings were presented today at the Annual Scientific Meeting of the American College of Gastroenterology in San Antonio.

Eosinophilic esophagitis is a relatively new disease, first noticed in young people, that causes those who have the condition to feel like solid food is sticking in their throat or like they have heartburn. A steroid applied to the esophagus is often used for treatment, but its effectiveness has not been scientifically proven.

For the randomized, double-blind study, 34 adults swallowed either a placebo or aerosolized fluticasone twice a day for six weeks. Fluticasone is used in inhalers and as a [nasal spray](#) to treat inflammation in the lungs and sinuses caused by allergies. The drug is a [corticosteroid](#) that decreases irritation and swelling and, when used for asthma, allows for easier breathing.

After completing the course of medication, the research volunteers were given questionnaires to assess their symptoms and side effects of the treatment. Their throats were examined with an endoscope and then through biopsies for the presence of eosinophils -- a type of white blood cell that secretes proteins, which researchers suspect causes swallowing

problems.

"We had complete histologic remission in 68 percent of the people who took the fluticasone, compared to zero for the placebo," says Jeffrey Alexander, M.D., a Mayo Clinic gastroenterologist and lead author on the study. "From this perspective, fluticasone does get rid of the eosinophils in the esophagus; however, people's symptoms did not improve."

Dr. Alexander attributes the lack of symptom improvement to several confounding factors. "We had a symptom response in 63 percent of the people, but we had a placebo response in 47 percent of the people, which is very high," Dr. Alexander says. "Our experience in clinical practice is that the symptoms do get better. We suspect the lack of symptom response was related to difficulty in assessing intermittent swallowing symptoms with our questionnaire."

The research team has multiple ongoing studies in the diagnosis, pathophysiology and treatment of eosinophilic esophagitis.

Provided by Mayo Clinic

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