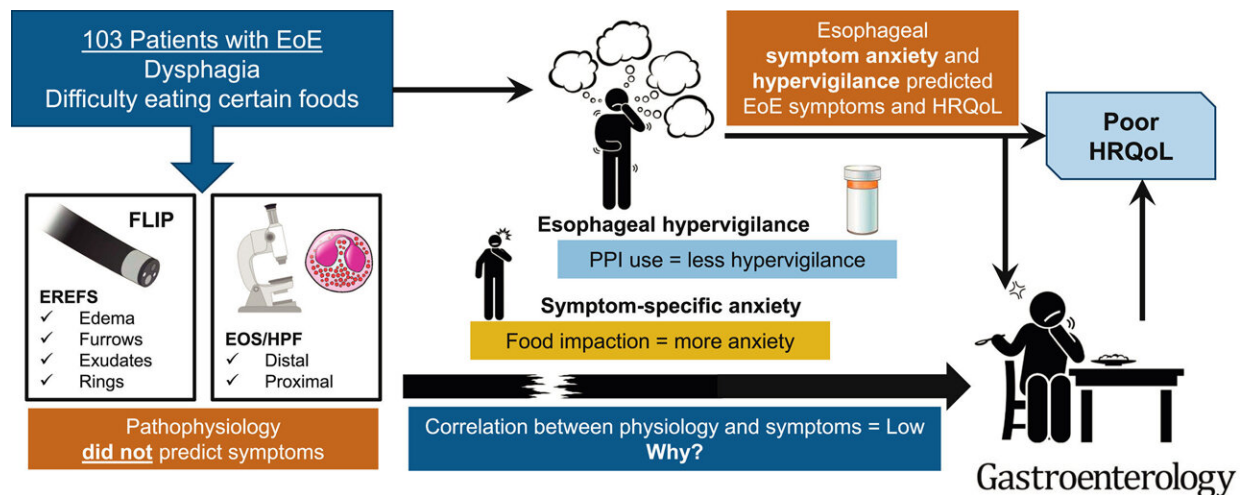


Evaluating esophageal hypervigilance and symptom anxiety

July 23 2021, by Melissa Rohman



Graphical abstract. Credit: DOI: 10.1053/j.gastro.2021.06.023

Measuring levels of hypervigilance and symptom-specific anxiety may improve healthcare providers' understanding of patient outcomes for severe esophageal diseases and treatment strategies, according to a Northwestern Medicine study published in the journal *Gastroenterology*.

"If we identify people who have a lot of symptom anxiety and hypervigilance, we could in parallel treat the disease and their hypervigilance and anxiety and get them to a better place in terms of living with their symptoms. Those are the people who are going to have

optimal outcomes," said John Pandolfino, MD, '94, '96 GME, the Hans Popper Professor, chief of Gastroenterology and Hepatology in the Department of Medicine and senior author of the study.

Eosinophilic esophagitis (EOE) is a chronic inflammatory disease caused by excess build up of white blood cells called eosinophils in the esophagus. This buildup is induced by an allergic reaction from foods such as dairy or wheat, causing the esophagus to narrow and become inflamed, making it difficult to breathe or swallow. The disease, which is thought be genetic, affects men more commonly than women and [current treatments](#) include strict food elimination diets, topical corticosteroids, proton pump inhibitors or a combination.

The psychosocial effects for patients with EOE, however, have remained understudied, according to the authors. These effects include hypervigilance—a heightened focus on [physical symptoms](#)—and symptom-specific anxiety such as a fear of choking, both of which have been associated with worse reported EOE symptoms and quality of life.

For the current study, the investigators performed a retrospective review of patient chart data for 103 people diagnosed with EOE; 70 percent of patients were male and an average age of 41 years.

The team found that 41 percent of patients reported having increased difficulty swallowing, or dysphagia, and 46 percent reported increased hypervigilance and symptom-specific anxiety. Additionally, increased levels of symptom-specific anxiety were directly correlated with patients reporting severity of dysphasia—deficits in speaking and language production—and poor overall quality of life.

The findings suggest that [cognitive behavioral therapy](#) is an essential component of improving symptom severity and quality of life for patients with EOE, in conjunction with physiologically treating the

disease. The current study may also serve as a model for studying hypervigilance and symptom-related anxiety across all disease states, according to the authors.

For next steps, the team is currently studying the efficacy of psychological behavioral treatments to target hypervigilance and symptom-specific anxiety in patients with different esophageal diseases.

"There's a healthy level of [hypervigilance](#) and [anxiety](#); we want people to be paying attention so that they're showing up for treatment and not falling off the radar. But then there's the tipping point to where it influences symptom severity perception and quality of life goes down and healthcare utilization goes up. We want to focus on getting these patients to have a healthy balance of those things," said Tiffany Taft, PsyD, associate professor of Medicine in the Division of Gastroenterology and Hepatology, of Medical Social Sciences, of Psychiatry and Behavioral Sciences, and lead author of the study.

More information: Tiffany H. Taft et al, Esophageal Hypervigilance and Symptom-Specific Anxiety in Patients with Eosinophilic Esophagitis, *Gastroenterology* (2021). [DOI: 10.1053/j.gastro.2021.06.023](#)

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