SALIVA-BASED DIAGNOSTIC TEST FOR EOSINOPHILIC OESOPHAGITIS

A research group from CIBER, Administration of the Autonomous Community of the Basque Country, Sescam and Basque Country University has developed a method to analyze the diagnosis and/or prognosis of Eosinophilic Esophagitis (EoE), using determination and quantification of certain salivary biomarkers.

The Need

Eosinophilic Esophagitis (EoE) is an inflammatory disease characterized by the presence of a large number of eosinophils in the esophagus. The symptoms caused by EoE are variable, including diarrhea or weight loss, and may be mistaken for other diseases, such as celiac disease.

EoE final diagnosis is currently achieved using invasive methods by means of upper gastrointestinal endoscopy and biopsies. A rise in EoE incidence and prevalence is becoming a major cause of upper gastrointestinal morbidity in children and adults.

The Solution

Delayed diagnosis seems associated with fibrostenotic disease complaints, suggesting timely recognition of the disease may impact its clinical course.

This invention provides a non-invasive method for selective testing of patients with higher risk of developing EoE, facilitating diagnostic processes, reducing the number of endoscopies, and enabling better management of patients.

Advantages

• Selective diagnostic. Specific identification of patients with high risk of EoE development.

• Non-invasive method. This method analyze the new biomarkers in saliva samples avoiding the invasive analysis of esophageal biopsies obtained by endoscopy.

• Feasibility. The expression levels of the biomarkers are analyzed by standard quantitative PCR (qPCR), available in most diagnostic centers.

• Quick and low cost. There is a wide offer of low-cost systems and fast Thermocyclers for the analysis of mRNA by qPCR.

Intellectual Property:

• European patent filled (January, 2023)

• Suitable for PCT application

Aims

Looking for a partner interested in a license and/or a collaboration agreement to develop and exploit this asset.

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