



INTISARI

Perbedaan Reaksi Hipersensitivitas antara Kejadian Gastritis Eosinofilik dan Kolitis Eosinofilik.

Latar Belakang: Penyakit Eosinofilik Saluran Cerna (*Eosinophilic Gastrointestinal Disorders/EGID*) merupakan kondisi inflamasi kronis dengan infiltrasi eosinofil patologis pada saluran pencernaan. Dua subtype yang relatif jarang namun penting adalah Gastritis Eosinofilik (GE) dan Kolitis Eosinofilik (KE). Mekanisme imunologis keduanya diduga berbeda, di mana GE lebih banyak berasosiasi dengan reaksi hipersensitivitas tipe I (*IgE-mediated*), sedangkan KE lebih sering berkaitan dengan mekanisme *non-IgE mediated*. Perbedaan ini berimplikasi pada diagnosis, pola alergi, serta penatalaksanaan, namun data pembandingnya masih terbatas terutama di Indonesia.

Tujuan: Mengetahui perbedaan reaksi hipersensitivitas antara kejadian GE dan KE, serta menilai korelasi marker hipersensitivitas (kadar IgE total, eosinofil darah, dan eosinofil jaringan) dengan derajat keparahan klinis pada kedua kelompok.

Metode: Penelitian potong lintang dilakukan di RSUP DR. Sardjito terhadap pasien dewasa dengan diagnosis GE atau KE berdasarkan kriteria klinis, endoskopi atau kolonoskopi, dan histopatologi. Pemeriksaan meliputi pengukuran kadar IgE total, eosinofil darah perifer, jumlah eosinofil jaringan, serta uji *skin prick test* (SPT). Derajat keparahan dinilai menggunakan *Nepean Dyspepsia Index* (NDI) untuk GE dan *Short Inflammatory Bowel Disease Questionnaire* (SIBDQ) untuk KE.

Hasil: Sebanyak 48 subjek diikutsertakan (25 GE dan 23 KE). Tidak ditemukan perbedaan bermakna kadar IgE total antara GE dan KE ($p = 0,123$). Tidak terdapat korelasi signifikan antara marker hipersensitivitas (IgE, eosinofil darah, eosinofil jaringan) dengan derajat keparahan pada kedua kelompok. Namun, rerata jumlah alergen positif pada SPT lebih tinggi pada GE dibanding KE (4,73 vs. 3,13; $p = 0,012$), menunjukkan bahwa GE memiliki profil sensitisasi alergen yang lebih luas.

Kesimpulan : Reaksi hipersensitivitas yang dapat dideteksi melalui IgE total maupun eosinofil darah tidak menunjukkan perbedaan bermakna antara GE dan KE. Namun, GE memiliki jumlah sensitisasi alergen yang lebih tinggi pada uji SPT dibanding KE. Marker hipersensitivitas tidak berkorelasi dengan derajat keparahan klinis baik pada GE maupun KE. Temuan ini menekankan perlunya pemeriksaan alergi yang komprehensif pada GE dan KE.

Kata Kunci: Gastritis eosinofilik, kolitis eosinofilik, IgE, hipersensitivitas, alergi, eosinofil, *skin prick test*



ABSTRACT

Differences in Hypersensitivity Reactions between Eosinophilic Gastritis and Eosinophilic Colitis

Background: Eosinophilic Gastrointestinal Disorders (EGID) are chronic inflammatory conditions characterized by pathological eosinophilic infiltration in the gastrointestinal tract. Two relatively uncommon but clinically important subtypes are Eosinophilic Gastritis (EG) and Eosinophilic Colitis (EC). Their immunological mechanisms are presumed to differ, with EG more frequently associated with type I hypersensitivity reactions (IgE-mediated), whereas EC is often linked to non-IgE-mediated pathways. These differences have implications for diagnosis, allergy profiling, and management; however, comparative data remain limited, particularly in Indonesia.

Objective: To determine differences in hypersensitivity reactions between EG and EC, and to assess the correlation between hypersensitivity markers (total IgE levels, peripheral blood eosinophils, and tissue eosinophils) and clinical severity in both groups.

Methods: A cross-sectional study was conducted at DR. Sardjito General Hospital involving adult patients diagnosed with EG or EC based on clinical findings, endoscopy or colonoscopy, and histopathology. Assessments included measurement of total serum IgE, peripheral eosinophil counts, tissue eosinophil infiltration, and skin prick testing (SPT). Clinical severity was evaluated using the Nepean Dyspepsia Index (NDI) for EG and the Short Inflammatory Bowel Disease Questionnaire (SIBDQ) for EC.

Results: A total of 48 subjects were enrolled (25 EG and 23 EC). No significant difference was observed in total IgE levels between the two groups ($p = 0,123$). There was no significant correlation between hypersensitivity markers (IgE, blood eosinophils, or tissue eosinophils) and disease severity in either group. However, the mean number of positive allergens on SPT was higher in EG than in EC (4,73 vs. 3,13; $p = 0,012$), indicating a broader allergen sensitization profile in EG.

Conclusion: IgE-mediated markers and peripheral eosinophil counts did not significantly differ between EG and EC. Nonetheless, EG demonstrated a higher number of positive allergen sensitizations on SPT compared with EC. Hypersensitivity markers did not correlate with clinical severity in either condition. These findings highlight the need for comprehensive allergy evaluation in both EG and EC.

Keywords: Eosinophilic gastritis, eosinophilic colitis, IgE, hypersensitivity, allergy, eosinophil, skin prick test.