Government of **Western Australia**
Department of **Health**

Western Australian Coding Rule

1113/07 Eosinophilic oesophagitis

WA Coding Rule 0615/03 *Eosinophilic oesophagitis* is superseded by ACCD Coding Rule *Eosinophilic oesophagitis* (Ref No: Q3045) effective 1 October 2016; (log in to view on the ACCD CLIP portal).

DECISION

WA Coding Rule 0615/03 *Eosinophilic oesophagitis* is retired.

[Effective 1 Oct 2016, ICD-10-AM/ACHI/ACS 9th Ed.]

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0615/03 Eosinophilic oesophagitis

Q.

Which code/s should be assigned for eosinophilic oesophagitis? Should both K20 *Oesophagitis* and D72.1 *Eosinophilia* be assigned or just K20?

A.

Eosinophilic oesophagitis is a form of oesophagitis where the mucosa of the oesophagus is infiltrated by eosinophils (a type of white blood cell). The aetiology of this condition is not well known, however it may be associated with allergies. Symptoms of eosinophilic oesophagitis include dysphagia, heartburn, regurgitation and vomiting. Treatment may include dietary modification, medication and oesophageal dilation in severe cases.

Eosinophilia is a generalised blood disorder where there is an increase in the number of eosinophils in the blood. It may be due to a number of causes such as allergic disorders, infections, certain tumours, leukemias or be idiopathic.

A code for eosinophilia should **not** be assigned to describe eosinophilic oesophagitis as it refers to a generalised blood disorder rather than infiltration of the oesophageal mucosa as in eosinophilic oesophagitis.

Coders should assign K20 *Oesophagitis* for documentation of eosinophilic oesophagitis by looking up the lead term 'Oesophagitis' in the Index.

DECISION

Eosinophilic oesophagitis should be coded to K20 *Oesophagitis*. An additional code for eosinophilia should not be assigned.

[Effective 24 Jun 2015, ICD-10-AM/ACHI/ACS 8th Ed.]

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