

The main limitation of the study is that, in some way, the choice of the cut point is empirical, although these researchers already used this method previously in adult patients[4] . Other limitations would be:

1.The determination of specific IgE levels is not sufficient to identify the foods that trigger the EoE, as there are patients with negative skin tests who respond to treatment with elimination diets [4].

2. The correct interpretation of allergy tests is not always easy because the association with other atopic diseases such as rhinitis, asthma, eczema or food allergy mediated by IgE is present in many patients [5] and have, therefore, specific skin tests and / or IgE positive with inhalants or foods that are not necessarily responsible for the EE.

3. The treatment with empirical diets of elimination of 6 foods (wheat, milk, egg, soy, nuts, fish / shellfish), has been effective[11], with results very similar to ours **with 4 foods**.

4. sIgE is not a marker for the food group since the patient could reintroduce some foods from that specific group.

5. Previously the diets based on allergy tests (skin and patch tests)[12], have not been reproduced by other researchers

11. Lucendo AJ, Arias Á, González-Cervera J, Yagüe-Compadre JL, Guagnozzi D, Angueira T et al. Empiric 6-food elimination diet induced and maintained prolonged remission in patients with adult eosinophilic esophagitis: a prospective study on the food cause of the disease. *J Allergy Clin Immunol*. 2013; 131:797–804.

12. Spergel JM, Brown-Whitehorn TF, Cianferoni A, Shuker M, Wang ML, Verma R, et al. Identification of causative foods in children with eosinophilic esophagitis treated with an elimination diet. *J Allergy Clin Immunol*. 2012;130: 461–467