Azithromycin/hydroxychloroquine

Cardiac arrest following off-label use: 2 case reports

In a case series, a 73-year-old man and an 80-year-old woman were described, who developed fatal cardiac arrest, while receiving off-label treatment with azithromycin and hydroxychloroquine for COVID-19 [dosages and routes not stated; not all times to reactions onsets stated].

Patient 1: A 73-year-old man, who had end-stage renal disease (ESRD), was referred to the emergency department with symptoms of general malaise, cough and dyspnoea. Following investigations, COVID-19 was diagnosed. He was admitted and was treated with off-label hydroxychloroquine and azithromycin along with concomitant unspecified low molecular weight heparins. His baseline QTc interval was normal. His COVID-19 symptoms were improving. However, on day 3 of the treatment, he died of cardiac arrest. Of note, he did not need any respiratory support, while his CRP levels and other inflammatory markers were decreasing. Troponin and creatine kinase-MB (CK-MB) levels were also normal at the time of death. The fatal cardiac arrest was attributed to azithromycin and hydroxychloroquine treatment.

Patient 2: An 80-year-old woman, who had ESRD, was investigated for nausea and vomiting. Following investigations, COVID-19 was diagnosed. She was admitted and was treated with off-label hydroxychloroquine and azithromycin along with concomitant unspecified low molecular weight heparins. Her baseline QTc interval was normal. Her ongoing high D-dimer level on admission further increased on day 3. However, she did not deteriorate clinically. She had mild interdialytic high potassium levels, reaching 5.8 mEq/L. On day 4 of admission, she died of cardiac arrest. Of note, she did not have underlying hypotension. Additionally, blood troponin and CK-MB levels at the time of death were both normal. The fatal cardiac arrest was attributed to azithromycin and hydroxychloroquine treatment.

Murt A, et al. Sudden Cardiac Death in Haemodialysis Patients under Hydroxychloroquine Treatment for COVID-19: A Report of Two Cases. Blood Purification : 8 Oct 2020. Available from: URL: http://doi.org/10.1159/000511392 803515412