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LETTER TO THE EDITOR

Drug induced hepatitis and SARS-CoV-2 vaccination: Correspondence



Dear Editor, we would like to discuss "Drug-induced hepatitis (DIH) after SARS-CoV-2 vaccination [1]." According to Asgarzdeh et al., vaccine-induced hepatitis is a rare consequence, with the majority of documented cases being small and self-limited. Given the benefits outweighing the hazards of the vaccine, it is critical that this article not deter the general population from receiving the vaccine [1]. Asgarzdeh et al. stressed the importance of informing healthcare practitioners about the potential link between the vaccine and the onset of liver damage as more countries consider the first and second booster doses of COVID-19 vaccination [1].

Co-morbidity is regularly eliminated before obtaining clinical data from the patient for immunization. Coping with co-morbidity may be difficult if there is an issue after receiving the COVID-19 vaccine [2]. If a clinical issue develops following the immunization, this is frequently not an option. There is still a chance of SARS-Co-V2 asymptomatic confounding. For instance, thrombohemostatic illness, a clinical disorder that may coexist with dengue in a person who had the vaccination, can be brought on by dengue [3]. Recent research [4] found a connection between underlying genetic variation and the recipients of the COVID-19 vaccination's immunological response. The effects of the various genetic background components should be assessed in any planned future research.

References

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