Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

The Journal of Emergency Medicine, Vol. 62, No. 3, pp. 423–424, 2022

0736-4679/$ - see front matter

Letters to the Editor

□ Response to "Bilateral Retinal Detachments in a Healthy 22-Year-Old Woman After Moderna SARS-CoV-2 Vaccination"R

□ To the Editor:

Editor's Note: JEM does not typically retract articles that result in controversy of difference of opinion among authors and readers of the journal. We support and encourage publication of legitimate, constructive scientific discourse. Case reports can only demonstrate possible associations and should be interpreted as such, however, it is important to report even potential associations to add to existing literature.

Subramony et al. reported a case of a 22-year-old woman with myopia who presented with bilateral retinal detachments 10 days after a second dose of a COVID-19 vaccine (1). They suggest that their case is unique and presents a possible correlation between the SARS-CoV-2 vaccine and the risk for retinal detachment.

Their report has the potential to misinform the public and contribute to vaccine hesitancy rates. We are aware that the report has been shared via social media channels and reported on in the medical press (2).

We would like to highlight numerous clinical features that confirm that the retinal detachments in the case reported were unrelated to the prior COVID-19 vaccine and developed prior to the vaccine being administered. Firstly, the patient presented with typical features of bilateral retinal detachments secondary to round retinal holes, which are known to occur typically in young myopic women and are not seen uncommonly by retinal surgeons worldwide (3). The fundus images in the case reported clearly demonstrate the presence of two atrophic round retinal holes in the right superotemporal detached retina and at least nine atrophic round retinal holes in the left temporal detached retina. Retinal detachments associated with round retinal holes typically occur in the 20- to 40-year-old age group, are more common in women (64% in female patients vs. 36% in male patients), are strongly associated with myopia, are often chronic, and are bilateral in almost one-half (45%) of these patients (3). Secondly, the fundus images presented in the case demonstrate features of chronicity. There is a linear band of subretinal fibrosis under the superotemporal aspect of the right detached retina and a pigmented, fibrotic demarcation line at the nasal margin of the left retinal detachment. Subretinal fibrosis and fibrotic demarcation lines are hallmark diagnostic features of a chronic retinal detachment that develops over a period of months and years, proving that the retinal detachments were present before the COVID-19 vaccine injection 10 days prior to presentation (4).

Severe or unusual complications after vaccinations remain rare yet continue to evoke a disproportionate response from the public and health care practitioners (5). Given the global vaccination uptake with the COVID-19 pandemic, the presence of consequential adverse effects is not unexpected. Reporting these unusual complications remains essential to help refine both treatment and education; however, it is imperative that practitioners remain alert to pre-existing clinical signs and risk factors to minimize attributing cases unnecessarily to the vaccination process. We have demonstrated that this case represents a chronic development in a patient with multiple risk factors and not a result of the COVID-19 vaccination.

Simon D. Chen
Vision Eye Institute, New South Wales, Australia,
Faculty of Science, University of New South Wales,
Sydney, NSW, Australia

Chris Hodge
Vision Eye Institute, New South Wales, Australia,
Faculty of Medicine and Health, Clinical
Ophthalmology and Eye Health, Save Sight Institute,
The University of Sydney, Sydney NSW, Australia

https://doi.org/10.1016/j.jemermed.2021.10.049

References

1. Subramony R, Lin LC, Knight DK, Aminlari A, Belovarski I. Bilateral retinal detachments in a healthy 22-year-old woman after Moderna SARS-CoV-2 vaccination [published online ahead of print July 19, 2021]. J Emerg Med doi:10.1016/j.jemermed.2021.07.034.
2. Atwood S. Is this adverse event related to the Moderna vax? AusDoc. 2021. Published August 13Accessed August 20, 2021. Available at: https://www.ausdoc.com.au/medical-mustsee/medical-mustsee-look-out-potential-adverse-event-moderna-vax.
3. Ung T, Comer M, Ang A, et al. Clinical features and surgical management of retinal detachment secondary to round retinal holes. Eye 2005;19:665–9.
4. Zinn KM. Long-standing retinal detachments. Clinical Atlas of Peripheral Retinal Disorders. New York: Springer; 1988. p. 109–13.
5. Lyu JC, Han EL, Luli GK. COVID-19 vaccine-related discussion on twitter: topic modeling and sentiment analysis. J Med Internet Res 2021;23(6):e24435.