

Aspirin/clopidogrel

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Lack of efficacy: case report

A 58-year-old woman exhibited lack of efficacy while receiving dual antiplatelet therapy (DAPT) with aspirin and clopidogrel for the prevention of ischaemic stroke [*routes and dosages not stated*].

The woman presented on 3 April 2020 for the assessment of left-sided facial droop, dysarthria and left-sided hemiparesis, which she was experiencing since an hour. She was admitted. She had a significant medical history for cerebral artery ischaemic stroke in 2019, and had been receiving dual DAPT with clopidogrel and aspirin. Additionally, she was on immunosuppressive therapy with tacrolimus and mycophenolate mofetil following renal transplant. On admission, investigations showed focal neurological deficits and patent vasculature. She was also noted to have ischaemic stroke despite DAPT with clopidogrel and aspirin indicating lack of efficacy of these medications. She then developed left cerebellar infarction.

Later, the woman was given aspirin 325mg daily along with unspecified statin and thrombolytics with improvement of neurological symptoms. On 8 April 2020, focal neurological deficits worsened. She was shifted to the ICU and was given hypertonic saline solution with close monitoring. She was then noted to have a severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), which eventually progressed to hypoxic respiratory failure. On 13 April 2020, she became hypotensive and bradycardic. She was intubated; however, her respiratory status continued to decline. On the morning of 14 April 2020, she died [*immediate cause of death not stated*]. It was noted that hypercoagulable state due to SARS-CoV-2 had contributed to the development of ischaemic stroke.

Mahboob S, et al. Large vessel stroke and COVID-19: Case report and literature review. *eNeurologicalSci* 20: Sep 2020. Available from: URL: <http://doi.org/10.1016/j.ensci.2020.100250>

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