## Reactions 1904, p336 - 30 Apr 2022

Multiple drugs X S

## No response following concomitant use: case report

A 71-year-old man exhibited no response following concomitant use of immunosuppressive treatment with mycophenolate mofetil, tacrolimus, rituximab and prednisone and tozinameran for immunisation against COVID-19 [route and dosage not stated]. The man, who had undergone lung transplant (LT) had received induction therapy with rituximab which was followed by immunosuppressive maintenance therapy with mycophenolate mofetil, tacrolimus and prednisone. Early after LT, he had a single episode of minimal acute cellular rejection. However, he never needed significantly augmented immunosuppression. Notably, throughout his post-LT course, he had mild leukopenia. It was reported that, he had received tozinameran [Pfizer SARS-CoV-2 vaccine]. However, he showed no response to four doses of the tozinameran; which suggested an advanced immunosuppression. It was considered that, no response exhibited by tozinameran was attributed to the concomitant use of tozinameran and rituximab, mycophenolate mofetil, tacrolimus and prednisone. At 14 months after LT, he reported progressive anaemia and aphasia, however, no other neurologic deficits were noted. Subsequent investigations led to a diagnosis of progressive multifocal leukoencephalopathy (PML). Thereafter, his immunosuppressive treatment was reduced to a combination of tacrolimus with a goal trough 4-6 and prednisone 5mg daily. However, despite the reduction of immunosuppression studies revealed worsening of PML. Moreover, his symptoms progressed to severe anaemia, aphasia and cortical blindness. However, still no motor deficits were noted.

Meza LF, et al. Progressive Multifocal Leukoencephalopathy Presenting as Expressive Aphasia in a Lung Transplant Recipient. Journal of Heart and Lung Transplantation 41 (Suppl.): S281, No. 4, Apr 2022. Available from: URL: http://doi.org/10.1016/j.healun.2022.01.690 [abstract]