

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.

Elsevier hereby grants permission to make all its COVID-19-related research that is available on the COVID-19 resource centre - including this research content - immediately available in PubMed Central and other publicly funded repositories, such as the WHO COVID database with rights for unrestricted research re-use and analyses in any form or by any means with acknowledgement of the original source. These permissions are granted for free by Elsevier for as long as the COVID-19 resource centre remains active.



Check for updates



□ GUILLAIN-BARRE SYNDROME, FACIAL DIPLEGIA, AND PFIZER COVID-19 VACCINE

 \Box To the Editor:

We would like to share our thoughts on "Guillain-Barre Syndrome Presenting as Facial Diplegia after COVID-19 Vaccination: A Case Report" (1). Rossetti et al. stated that "It is critical for emergency physicians to be aware of the manifold presentations of GBS for early recognition . . . worldwide vaccination campaign in response to the COVID-19 pandemic" (1). Guillain-Barre syndrome (GBS) after vaccination is a possible adverse event after receiving the COVID-19 vaccine. It is necessary to exclude other possible causes by means of serologic examination for other infections. Indeed, another possible cause of the problem is hyperviscosity after vaccination. After COVID-19 vaccination, hyperviscosity can be induced and hyperviscosity is a possible cause of a temporary manifestation, such as GBS and diplegia (2–4).

https://doi.org/10.1016/j.jemermed.2021.10.038

References

- Rossetti A, Gheihman G, O'Hare M, Kosowsky JM. Guillain-Barre syndrome presenting as facial diplegia after COVID-19 vaccination: a case report. J. J Emerg Med 2021. doi:10.1016/j.jemermed.2021.07.062.
- Joob B, Wiwanitkit V. Expected viscosity after COVID-19 vaccination, hyperviscosity and previous COVID-19. Clin Appl Thromb Hemost 2021;27.
- **3.** Abrams RMC, Elder GA. Safety of therapeutic plasma exchange for the treatment of Guillain-Barre syndrome in polycythemia vera. Neurologist 2018;23:185–7.
- 4. Goldberg K, Wirth FH, Hathaway WE, et al. Neonatal hyperviscosity. II. Effect of partial plasma exchange transfusion. Pediatrics 1982;69:419–25.

Abbreviations: COVID-19, coronavirus disease 2019.