AZD-1222/elasomeran/tozinameran

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Various toxicities: 5 case reports

In case series, five patients aged 62–82 years (4 women and 1 man) were described, who developed pityriasis rubra pilaris (PRP) (n=2), sweet syndrome (SS) (n=1), pityriasis lichenoides et varioliformis acuta (PLEVA) (n=1) and erythema multiforme (EM) (n=1) during vaccination therapy with AZD-1222, elasomeran or tozinameran for COVID-19.

Case 1 (a 62-year-old woman): The woman received first dose of elasomeran [COVID-19 vaccine; manufactured by: Moderna]. Her medical history was significant for metabolic syndrome, type 2 diabetes mellitus (T2DM), hypertensive heart disease, hypothyroidism and chronic kidney disease (CKD). After 5 days of elasomeran administration, she developed PRP. She was therefore treated with prednisone and unspecified topical steroids. Progressive remission was noted at 1 month follow-up.

Case 2 (a 82-year-old woman): The woman received first dose of tozinameran [COVID-19 vaccine; manufactured by: Pfizer–BioNTech]. Her medical history was significant for plaque and nail psoriasis, chronic lymphocytic leukaemia, T2DM, hypertension and chronic obstructive pulmonary disease (COPD). After 7 days of tozinameran administration, she developed PRP. She was therefore treated with methotrexate. Clinical improvement was observed. However, residual palmoplantar hyperkeratosis and scaly plaques were noted on head and neck at the 4 month follow-up.

Case 3 (a 69-year-old woman): The woman received first dose of AZD-1222 [COVID-19 vaccine; manufactured by: Oxford–AstraZeneca]. Her medical history was significant for overweight, hypertension, dyslipidaemia and iron-deficiency anaemia. After 12 days of AZD-1222 administration, she developed SS. She was therefore treated with prednisone. At 3 month follow-up, complete healing of the ulcerated plaques was observed with residual hyperpigmentation.

Case 4 (a 70-year-old man): The man received second dose of tozinameran [COVID-19 vaccine; manufactured by: Pfizer–BioNTech]. His medical history was significant for acute lymphocytic leukaemia in complete remission. After 5 days of tozinameran administration, he developed PLEVA. He was therefore treated with fusidic acid and betamethasone cream. Complete remission was noted within 10 weeks.

Case 5 (a 76-year-old woman): The woman received first dose of tozinameran [COVID-19 vaccine; manufactured by: Pfizer–BioNTech]. Her medical history was significant for lung adenocarcinoma (stage IV), arterial hypertension, T2DM and COPD. After 4 days of tozinameran administration, she developed EM. She was therefore treated with methylprednisolone for 10 days. Complete clearance was noted within 10 days. No recurrence was observed with the second vaccine dose.

Sechi A, et al. Abrupt onset of Sweet syndrome, pityriasis rubra pilaris, pityriasis lichenoides et varioliformis acuta and erythema multiforme: unravelling a possible common trigger, the COVID-19 vaccine. Clinical and Experimental Dermatology 47: 437-440, No. 2, Feb 2022. Available from: URL: http://doi.org/10.1111/ced.14970 803647139

» **Editorial comment:** Details of this case report have previously been published and processed for Adis PV [see Reactions 1887 p124; 803621375], for the 69-year-old woman who developed sweet syndrome.