mrna-1273

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Minimal change disease: case report

A 63-year-old woman developed minimal change disease secondary to mRNA-1273 vaccine.

The woman had history of tobacco dependence and hypertension. In April 2021, she presented to hospital with progressive anasarca, periorbital oedema, fatigue and dyspneoa for 4 week. She reported that the development of foamy urine and the oedema appeared abruptly and happened less than a week after the first dose of mRNA-1273 [Moderna mRNA-1273 SARS-CoV-2 vaccination; *route and dosage not stated*] vaccine. Uncontrolled hypertension, mild acute kidney injury, hypoalbuminaemia, hyperlipidemia and proteinuria were noted. Twenty four hour urine collection showed 13.4g proteinuria, which confirmed nephrotic syndrome. Pathology confirmed minimal change disease with mild acute tubular injury. Focal acute interstitial nephritis was also noted. Four out of 69 sampled glomeruli were globally sclerosed. Tubulointerstitial fibrosis was noted to be 10%. The sampled glomeruli were noted to have 100% foot process effacement.

The woman was treated with valsartan and loop diuretics. She also received plus methylprednisolone followed by prednisone. She was recommended for forgo the second scheduled dose of mRNA-1273 vaccine [*outcome not stated*].

Holzworth A, et al. Minimal change disease following the Moderna mRNA-1273 SARS-CoV-2 vaccine. Kidney International 100: 463-464, No. 2, Aug 2021. Available from: URL: http://doi.org/10.1016/j.kint.2021.05.007

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