

Aspirin/tozinameran

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Ischaemic stroke, cerebral thrombosis and lack of efficacy: case report

An 87-year-old woman developed cerebral thrombosis and ischaemic stroke following vaccination with tozinameran against COVID-19 infection. Additionally, she exhibited lack of efficacy during treatment with aspirin for ischemic heart disease [*routes, dosages and outcomes not stated*].

The woman had history ischaemic heart disease, hypertension and dyslipidaemia that were managed with aspirin, bisoprolol, ezetimibe, and rosuvastatin. She presented with dysarthria, right gaze deviation and complete left hemiplegia 24h after receiving second dose of tozinameran [BNT 162b2] vaccine. No symptoms or signs of local or systemic reactogenicity occurred within the 21 day window of the first dose of tozinameran. On admission, imaging studies revealed a large right infarction, a clot sign indicating an occluding wall-adherent thrombus of the right middle cerebral artery consistent with cerebral thrombosis, and no significant atherosclerosis or any other abnormalities of the cervical and intracranial vessels. Platelet count and coagulation profile were normal. But, C-reactive protein was elevated. Despite, receiving aspirin she developed cerebral thrombosis. Additionally, she developed ischemic stroke and biomarkers of inflammation were elevated at the onset of stroke after the second dose of tozinameran. The development of cerebral thrombosis and ischemic stroke was attributed to vaccination with tozinameran.

The anti-platelet therapy was changed from aspirin to clopidogrel. She was ultimately discharged to a rehabilitation facility 32 days after admission. Accordingly, scoring on the Naranjo scale was 2, a possible relationship between tozinameran and the adverse events.

Famularo G. Stroke after COVID-19 vaccination. *Acta Neurologica Scandinavica* 145: 787-788, No. 6, Jun 2022. Available from: URL: <https://onlinelibrary.wiley.com/doi/10.1111/ane.13608>

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