

Multiple drugs

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Covid-19 reinfection: 2 case reports

In a case report, 2 patients were described, who developed Covid-19 infection during treatment with cyclophosphamide, doxorubicin, prednisone, rituximab and temozolomide for large B-cell lymphoma and primary central nervous system lymphoma, respectively [*routes, dosages, durations of treatments to reaction onsets not stated*].

Patient A: A 73-year-old woman, who had been diagnosed with Waldenstrom macroglobulinaemia and diffuse large B-cell lymphoma, started receiving therapy with cyclophosphamide, doxorubicin, prednisone and rituximab and had received third course on 1 December 2020. She was exposed to covid-19 on 11 December 2020. Further, on 15 December 2020, she developed fatigue and was admitted to hospital on 21 December 2020 with fever and was tested positive for Covid-19 attributed to therapy with cyclophosphamide, doxorubicin, prednisone and rituximab. Her condition improved initially and was discharged with home isolation. However, 28 days post symptom onset, on 12 January, she was readmitted to hospital in order to continue lymphoma treatment. She reported malaise and fatigue; further, on 13 January she became febrile and received therapy with ceftriaxone. On 30 January, She was again found to be positive for Covid-19. Eventually, she succumbed due to Covid-related respiratory failure.

Patient B: A 77-year-old woman was scheduled for radiotherapy with temozolomide and rituximab for primary central nervous system lymphoma for 7 days. On 20 January 2020, she was transferred to COVID-19 infected patient's room. On 24 January, she was found to be febrile and tested positive for Covid-19. Eventually, she succumbed due to Covid-related respiratory failure.

Kaila V, et al. SARS-CoV-2 late shedding may be infectious between immunocompromised hosts. *Infectious Diseases* 53: 880-882, No. 11, Jan 2021. Available from: URL: <http://www.tandfonline.com/loi/infid20#.VrgcOLdf1Fo>

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