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AZD-1222 S

Hyperglycaemic ketosis, mixed hyperglycaemic hypermolar state/diabetic ketoacidosis and diabetic ketoacidosis: 3 case reports

In a case series, three men aged 53–68 years were described, who developed hyperglycaemic ketosis, mixed hyperglycaemic hypermolar state/diabetic ketoacidosis or diabetic ketoacidosis after vaccination with AZD-1222 for the prevention of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection.

All three men presented in April 2021 with subacute onset of osmotic symptoms following 20–36 days of receiving first dose of AZD-1222 [ChAdOx1 nCoV-19; routes and doses not stated] vaccine. All three patients were obese and dyslipidaemic. Their medical history were also significant for hypertension and hypocholesteraemia (1 man), hypothyroidism and pre-diabetes (1 man) or hypertension and pre-diabetes (1 man). They had been receiving amlodipine and atorvastatin (1 man), levothyroxine-sodium [levothyroxine], omeprazole and colecalciferol (1 man) or amlodipine and indapamide (1 man). Following admission, they were investigated and diagnosed with hyperglycaemic ketosis (1 man), mixed hyperglycaemic hypermolar state/diabetic ketoacidosis (HHS-predominant) (1 man) or diabetic ketoacidosis (1 man). All these acute hyperglycaemic crises were identified to be related to AZD-1222 vaccine. 2/3 men with mixed hyperglycaemic hypermolar state/diabetic ketoacidosis (1 man) and diabetic ketoacidosis (1 man) were shifted to ICU, and received intensive care. They were admitted for a total of 3 days (1 man), 6 days (1 man), or 9 days (1 man) [outcomes not stated].

Edwards AE, et al. Acute hyperglycaemic crisis after vaccination against COVID-19: A case series. Diabetic Medicine 38: e14631, No. 11, Nov 2021. Available from: URL: http://doi.org/10.1111/dme.14631