

### Hydroxychloroquine/oseltamivir

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#### **Junctional rhythm and bradycardia: case report**

A 47-year-old woman developed junctional rhythm and bradycardia during off label treatment with hydroxychloroquine and oseltamivir for COVID-19 pneumonia.

The woman was admitted to a hospital in Iran on 20 April 2020. She had two weeks history of dyspnoea, shakes, dry coughs and bloody diarrhoea. She had no signs of aortic dissection at the time of admission. Later, she was diagnosed with COVID-19 pneumonia and was shifted to COVID-19 ward. Off label treatment with oseltamivir and hydroxychloroquine was started [*dosages and routes not stated*] from the first day of admission. Her respiratory and haemodynamic statuses were stable during hospitalisation. At 2pm on the day 8 of admission, she started having chest pain, loss of consciousness, bradycardia and needed intubation. Her pulse pressure was 80mm Hg and HR was 45 beats per min. ECG revealed junctional rhythm. Further findings suggested acute type A aortic dissection possibly associated with COVID-19 infection.

The woman needed an emergency cardiac surgery; however, she died of aortic dissection before shifting to the operating room.

Tabaghi S, et al. Acute type A aortic dissection in a patient with COVID-19. *Future Cardiology* 17: 625-629, No. 4, Jul 2021. Available from: URL: <http://doi.org/10.2217/fca-2020-0103>

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