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Multiple drugs

Cryptococcal meningoencephalitis and off-label use: case report

A 76-year-old woman developed cryptococcal meningoencephalitis following treatment with budesonide, methylprednisolone and off-label tocilizumab for SARS-CoV-2. She also received an off-label treatment with convalescent-anti-SARS-CoV-2-plasma [not all routes stated; dosages not stated].

The woman, who had an evident history of hypertension, was hospitalised with diarrhea followed by weakness and confusion. Her nasal swab test was found to be positive for SARS-CoV-2. She had worsening of fever and hypoxic respiratory failure, requiring mechanical ventilation. She then treated with remdesivir, along with off-label tocilizumab and convalescent-anti-SARS-CoV-2-plasma [convalescent plasma]. She also received IV methylprednisolone, inhaled budesonide, empiric antibacterial and micafungin for *Candida albicans*. She was successfully extubated and discharged to a skilled nursing facility. However, 19 days later, she was readmitted with fever and progressive encephalopathy. MRI brain revealed multiple strokes in bilateral cerebral and cerebellar hemispheres. Blood and CSF cultures gave positive results for *Cryptococcus neoformans*. She was diagnosed with *cryptococcal* meningoencephalitis [time to reactions onset not clearly stated].

The woman treated with amphotericin B and flucytosine. Her mental status worsened to a comatose state, which required intubation. At the time of report, she remained comatose. For *cryptococcal* meningoencephalitis, her treatment with steroids (methylprednisolone, budesonide) and off-label tocilizumab was considered as predisposing factor.

Thota DR, et al. Cryptococcal meningoencephalitis post coronavirus disease 2019 (COVID-19) Infection Recovery. Neurology 96 (Suppl.): no pagination, No. 15, May 2021 [abstract]