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Ad26.cov2-s/immune-globulin

Guillain barre syndrome and pseudohyponatraemia: case report

A 38-year-old man developed Guillain barre syndrome (GBS) following vaccination with Ad26.COV2-S for COVID-19 and pseudohyponatraemia following treatment with immune-globulin for Guillain barre syndrome.

The man presented with slurred speech, facial weakness and bilateral foot and hand paresthesias. He had received vaccination with Ad26.COV2-S [Johnson & Johnson Coronavirus disease 2019 (COVID-19) vaccine] for COVID-19. Two weeks after vaccination, he developed tingling and numbness in bilateral feet, hands, tongue and lips. Two days prior to the presentation, he developed difficulty in moving his mouth and forming words, drinking from a straw and controlling his lips, tongue and cheeks while eating. Review of systems revealed mild gait unsteadiness, dyspnoea on exertion, headaches and generalised fatigue. He had a medical history of depression and anxiety for which he received bupropion. He was a drinker and used marijuana on a daily basis. Initial examination revealed elevated BP, bilateral facial weakness, significant dysarthria, weak eye closure, inability to puff cheeks or smile against resistance and reduced deep tendon reflexes. Brain MRI revealed focal enhancement of the bilateral cisternal segments and bilateral internal auditory canal fundi. CSF analysis revealed elevated protein and albuminocytological dissociation. He was diagnosed with an atypical GBS.

The man was hospitalised and received IV immune-globulin [immunoglobulin] 2 g/kg over two days. His symptoms improved, however he developed hyponatraemia which reached a nadir during admission. Hyponatraemia was concluded to be multifactorial and attributed to pseudohyponatraemia in setting of immune-globulin. He was diagnosed with a syndrome of inappropriate antidiuretic hormone in the setting of GBS. He was treated with salt tablets and fluid restriction. Subsequently, his sodium improved during discharge. His condition improved and he was discharged on day four.

Rossetti A, et al. Guillain-Barre Syndrome Presenting as Facial Diplegia after COVID-19 Vaccination: A Case Report. Journal of Emergency Medicine 61: No. 6, Dec 2021. Available from: URL: http://doi.org/10.1016/j.jemermed.2021.07.062

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