

**Azd-1222/prednisolone****S****Guillain-Barre syndrome and lack of efficacy: case report**

A 48-year-old woman developed Guillain-Barre syndrome (GBS) following coronavirus disease 2019 (COVID-19) vaccination with AZD-1222 in Taiwan. Additionally, she exhibited lack of efficacy during treatment with prednisolone for GBS [*routes and dosages not stated*].

The woman reported paraesthesia and lower extremity numbness 2 weeks following first dose of AZD-1222 [oxford-AstraZeneca COVID-19 vaccine] inoculation. The numbness began in her toes and then slowly extended to her upper extremities and ankles. She also reported progressive whole-body muscle soreness with paresthesia in both feet and hands.

The woman required medical treatment 1 week following the symptom onset, when her condition progressively deteriorated. Physical examination demonstrated mild imbalance when requested to hop on 1 leg. She had impaired pin-prick sensation from the bilateral soles to the ankles and hands (dorsal-side more pronounced). Subsequently, she was admitted and a lumbar puncture was carried out. CSF analysis showed albumin cytological dissociation. Hence, GBS was supposed. She started receiving immune globulin [immunoglobulin]. Thereafter, she was discharged and received acupuncture and outpatient rehabilitation. But, 1 week following the discharge, the earlier relieved symptoms flared up again with worsened prickling pain accompanied by numbness in her feet and hands. She received prednisolone as well as acupuncture therapy, but, the symptoms did not improve (lack of efficacy). Additionally, she also received gabapentin. The pain was cyclical and continued throughout the day; however, it was worse at night. Hence, she used alprazolam [Xanax] as a sleeping aid for sleep disturbance. She reported facial numbness and temporomandibular joint pain on mastication, with struggle in swallowing and tongue extension. Therefore, she visited the NEURO department for help. Electromyography of the upper extremities demonstrated sensory motor polyradiculoneuropathy, with severe demyelination and mild axonal degeneration, a typical finding following latest GBS. The use of alprazolam and gabapentin persisted from prior to admission. The Pittsburgh Sleep Quality Index (PSQI) on hospital admission showed a score of 12 out of 21 that was utilised as baseline data. Subsequently, intravascular laser irradiation of blood (ILIB) was given. The PSQI was re-examined on the day of discharge. She received 5 courses of ILIB and a noteworthy improvement was observed. Rest of ILIB treatment courses were sustained in the outpatient setting.

Chang YL, et al. The effects of intravascular photobiomodulation on sleep disturbance caused by Guillain-Barre syndrome after Astrazeneca vaccine inoculation: Case report and literature review. [Review]. *Medicine* 101: No. 6, 11 Feb 2022. Available from: URL: [https://journals.lww.com/md-journal/Fulltext/2022/02110/The\\_effects\\_of\\_intravascular\\_photobiomodulation\\_on.17.aspx](https://journals.lww.com/md-journal/Fulltext/2022/02110/The_effects_of_intravascular_photobiomodulation_on.17.aspx)

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