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Heparin-induced thrombocytopenia : case report

A 68-year-old woman developed heparin-induced thrombocytopenia during anticoagulant therapy with heparin [*dosage and route not stated*].

The woman had a history of hyperlipidaemia, hypertension and obstructive sleep apnoea. She was then admitted with various symptoms and was diagnosed with COVID-19 pneumonia. On day 1 of admission, she had acute respiratory failure due to COVID-19 pneumonia. She received off-label therapy with hydroxychloroquine, azithromycin and tocilizumab for COVID-19 pneumonia. On day 4 of admission, she was transferred to the ICU for deteriorating respiratory failure requiring intubation. On day 9 of admission, she was noted to have a sudden onset of left-sided facial, arm and leg weakness with dysarthria. Investigations showed bilateral pulmonary embolism and right middle cerebral artery non-occlusive thrombus, for which she received alteplase. On day 10, her symptoms improved. Then, she started receiving clopidogrel. On day 11 of admission, her breathing improved with reduction in cough severity; however, she was still suffering from mild tachypnoea and residual shortness of breath and required increased oxygen supplements. She started receiving heparin therapy on day 11 of admission. On day 13 of admission, she was noted to have signs of heparin-induced thrombocytopenia (HIT) with a further steady decline in platelets.

Treatment with heparin was stopped and she was started on fondaparinux with a plan to switch to apixaban. HIT was later confirmed through antibody testing. On day 15, she was discharged from the hospital in good general condition despite a positive repeat SARS-CoV-2 test with no evident neurological sequelae. She was instructed to practice continued quarantine for 2 weeks.

Yeganegi M, et al. Management and Prevention of Cerebrovascular Accidents in SARS-CoV-2-Positive Patients Recovering from COVID-19: a Case Report and Review of Literature. *SN Comprehensive Clinical Medicine* 3: 279-290, No. 1, Jan 2021. Available from: URL: <http://doi.org/10.1007/s42399-021-00744-3> 803552736