

mRNA COVID-19 Vaccination and Myocarditis

To the Editors:

We would like to share ideas on “Myocarditis following mRNA COVID-19 vaccine.”¹ Visclosky et al¹ concluded that “Point-of-care ultrasound may be a tool used to rapidly diagnose or risk stratify patients with potential post-COVID-19 vaccine myocarditis.” We agree that point-of-care ultrasound is a useful diagnostic tool. However, the interpretation usually requires an experienced practitioner and a tool that might not readily be available. In our setting, no point-of-care ultrasound is available in primary hospital. For diagnostic management, electrocardiography and cardiac enzyme are still

required. In the present case, the patient is likely to have myocarditis. However, it cannot definitively be mentioned that it is due to COVID-19 vaccination. For myocarditis in a COVID-19 vaccine recipient, it might be a coincidence relating to other cause. In case that it is induced by immunopathological process, there should be evidence from abnormal immunological parameter. For another possible pathogenesis, a hyperviscosity-induced cardiac problem, an abnormal blood viscosity should be detected.^{2,3}

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