



# Covid 19 and Myocarditis

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1

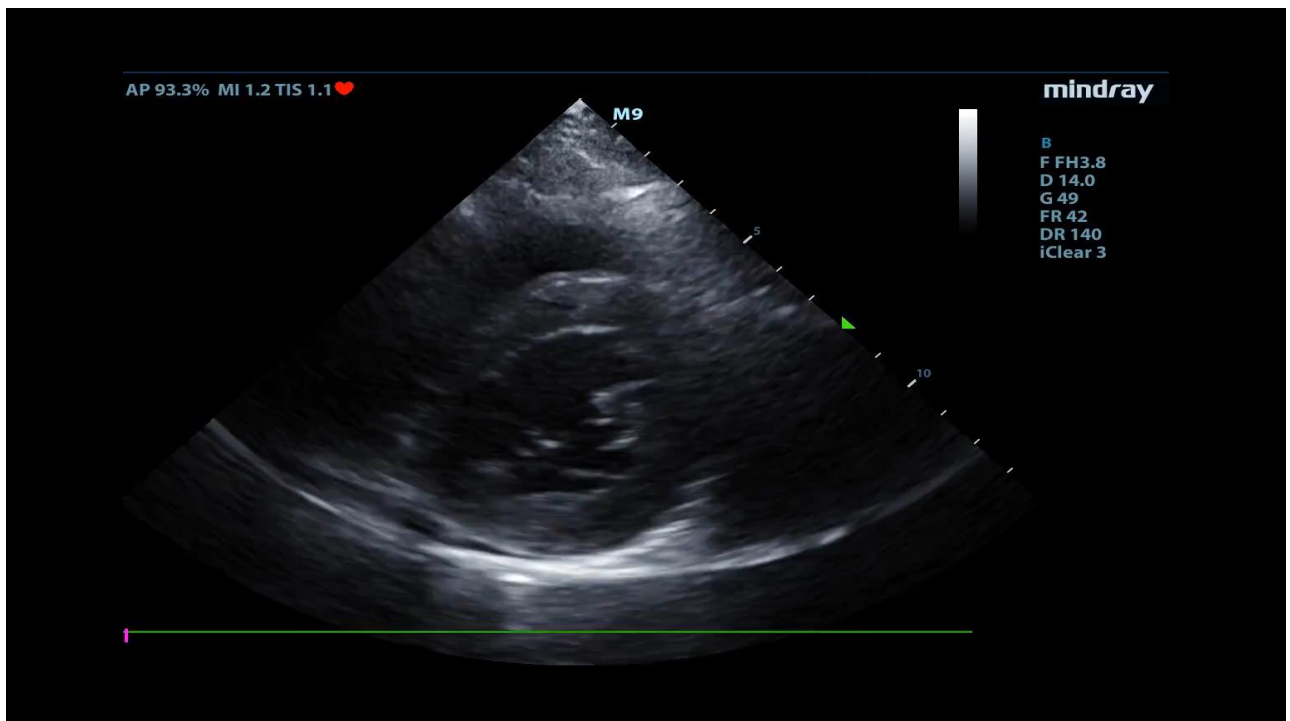
- No disclosures

2

## Your Case presentation:

- 15 Y/O M, chief complaint of chest pain
- 3 days ago received 2nd dose of mRNA COVID vaccine
- 2 days ago had low grade fevers and headache
- Today awoke with substernal aching pain
- Tachycardic to 110s
- Overall non-toxic appearing

3



4

## Case Conclusion

- Troponin 6881 pg/ml (ref 0-19)
- Admitted for post-vaccine myocarditis
- Cardiology-based echo showed 34% ejection fraction
- Treated with NSAIDS and gradually had improvement in pain
- 3 days later he was discharged with downtrending tropes and normal function on serial echos

5



## Vaccine Associated Myocarditis (VAM)

6

## Case presentation:

14 Y/O male awoke with chest pain , worsened by the early morning  
Dyspnea with activity and at rest.

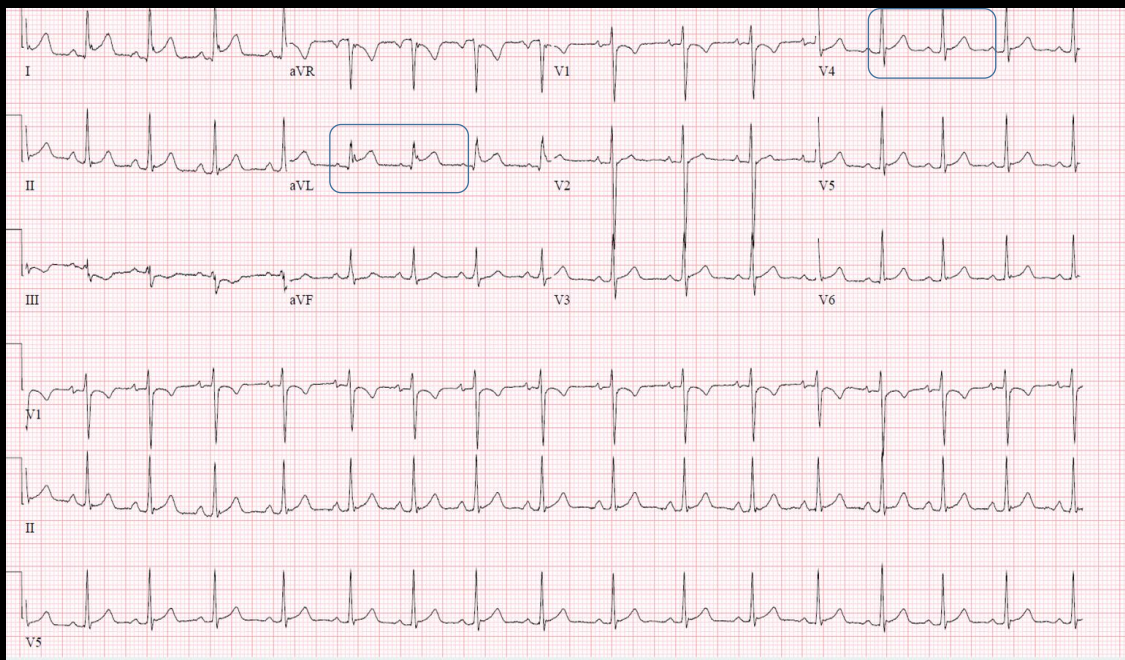
He is 2 days post second Covid vaccine with some mild fatigue  
symptoms occurring

Vitals stable: HR:90, BP: 124/72, Temp :37, sats 99%

Noted increased Troponin

EKG with ST elevations

7



8

## More Labs:

CBC: nl

Crp: 11.4 (.0-.06mg/dl)

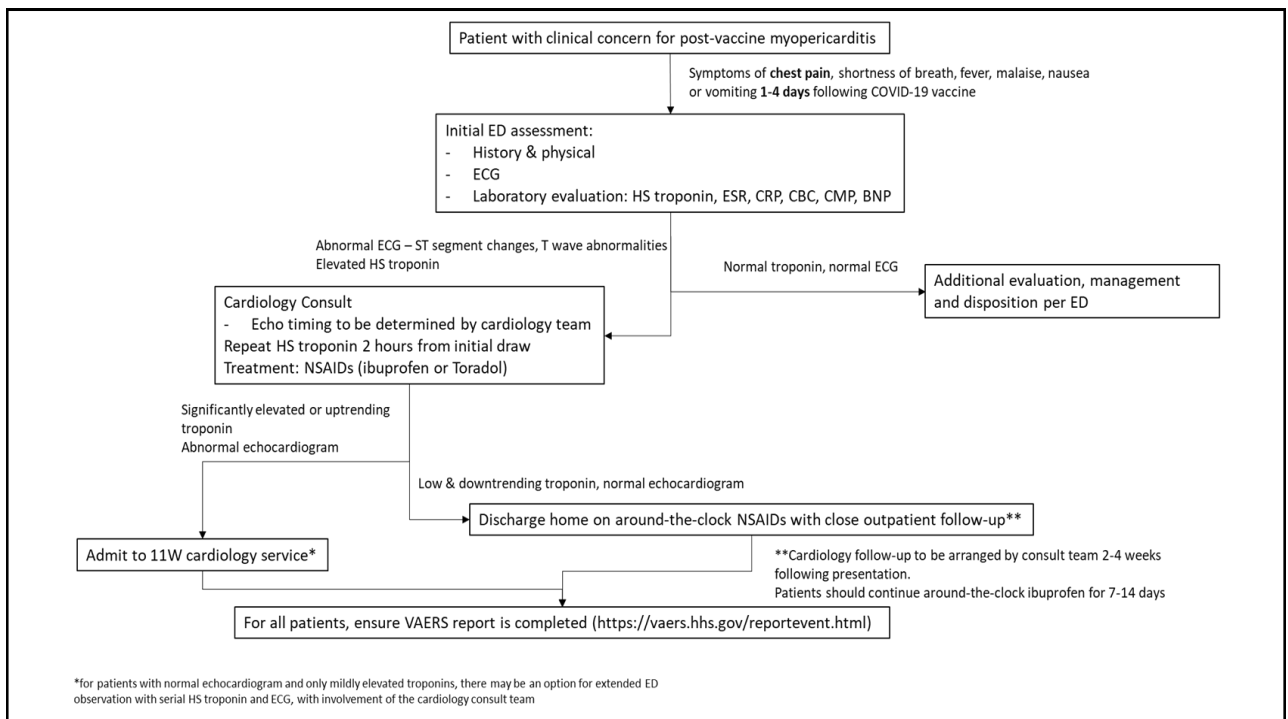
ESR:31 (0-15mm)

BNP : 9 (0-100pg/dl)

Troponin: max 1540, then down trended.

POCUS echo US: no effusion, good contractility

9



10

## Circulation

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<https://doi.org/10.1161/CIRCULATIONAHA.121.056583>



## ORIGINAL RESEARCH ARTICLE

## Clinically Suspected Myocarditis Temporally Related to COVID-19 Vaccination in Adolescents and Young Adults: Suspected Myocarditis After COVID-19 Vaccination

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11

**Table 1. Centers for Disease Control and Prevention Case Definitions for Probable and Confirmed Cases of COVID-19 Vaccine-Associated Myocarditis**

Probable case	Confirmed case
≥1 new or worsening symptom	≥1 new or worsening symptom:
Chest pain, pressure, or discomfort	Chest pain, pressure, or discomfort
Dyspnea or shortness of breath	Dyspnea or shortness of breath
Palpitations	Palpitations
Syncope	Syncope
AND ≥1 new finding of:	AND
Elevated troponin	Histological confirmation of myocarditis
Abnormal ECG or rhythm monitoring consistent with myocarditis	OR
Abnormal ventricular systolic function or wall motion abnormality on echocardiogram	Elevated troponin AND cardiac MRI findings consistent with the original or revised Lake Louise criteria for myocarditis <sup>14</sup>
Cardiac MRI findings consistent with the original or revised Lake Louise criteria for myocarditis <sup>14</sup>	AND no other identifiable cause of the symptoms and findings
AND no other identifiable cause of the symptoms and findings	

Adapted from Gargano et al<sup>11</sup> with permission. Copyright © 2021, Centers for Disease Control and Prevention. COVID-19 indicates coronavirus disease 2019.

12



White 66.2%

Male 90.6%

Teen 12-16y 52/5%  
16≤20y 47.5%

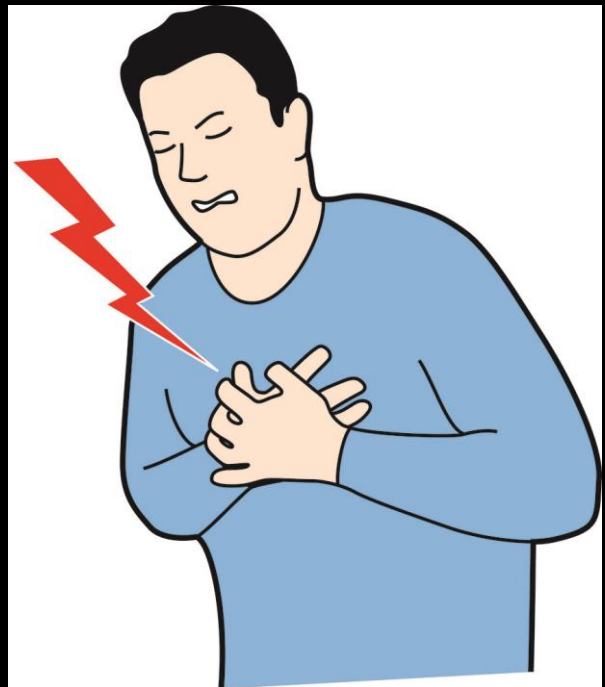
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Chest pain 99.3%

Fever 30.9%

Shortness of breath 27.3%

Headache, myalgias, vomiting,  
fatigue, palpitations, rash,  
diarrhea, conjunctivitis



This Photo

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14



# Echo



ALOS 2 days





NSAIDS

Steroids

IVIG

Colchine

Anakinra

No treatment



17

## Vaccine Related Myocarditis

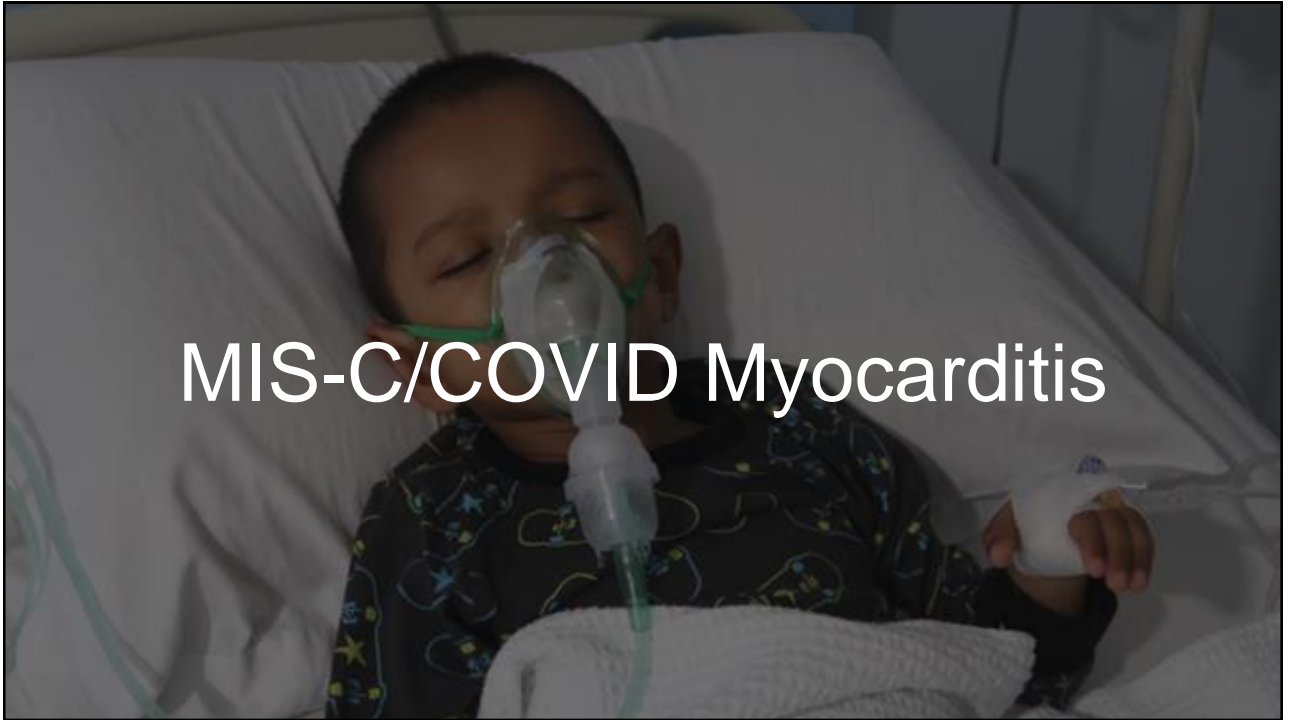
Symptoms usually present within a week after vaccine

No patients died

Most have a benign course

Repeat echos show normal function

18



19

Case Presentation

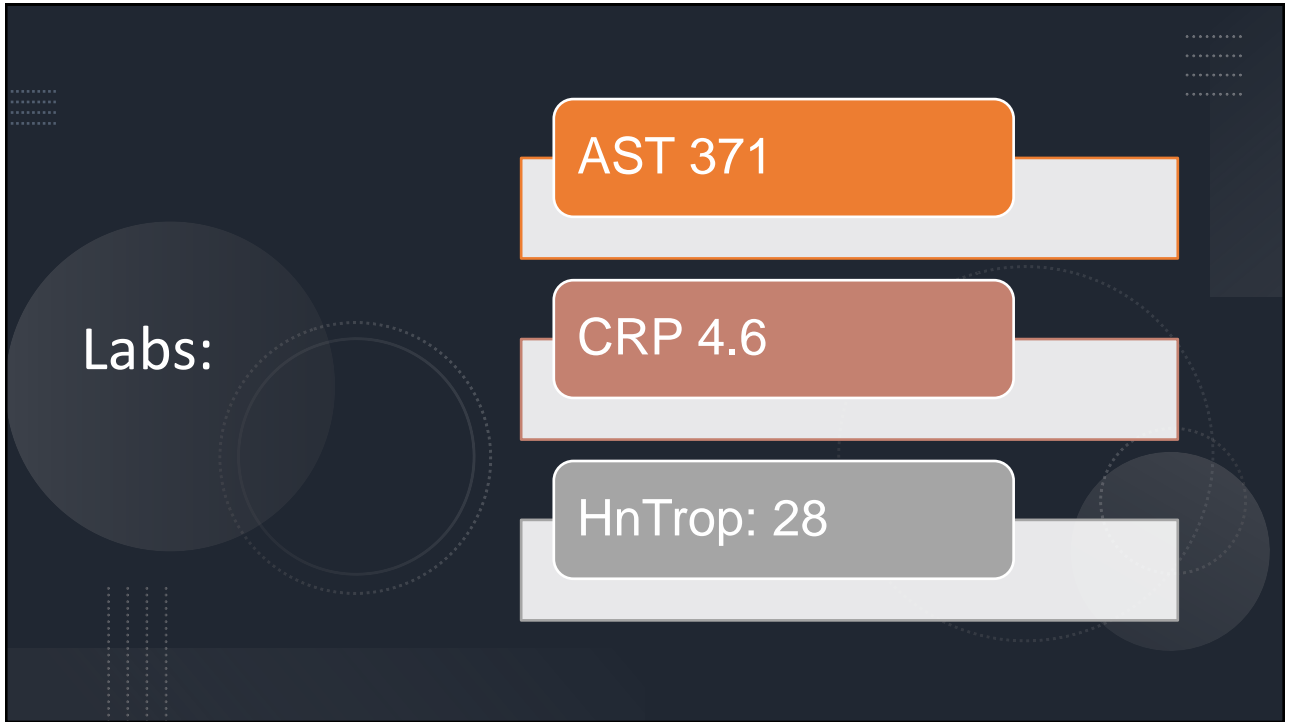
12yo male HA, neck pain, nausea, diarrhea, fatigue

- 2yo sister sick with URI 2 weeks ago, home covid neg

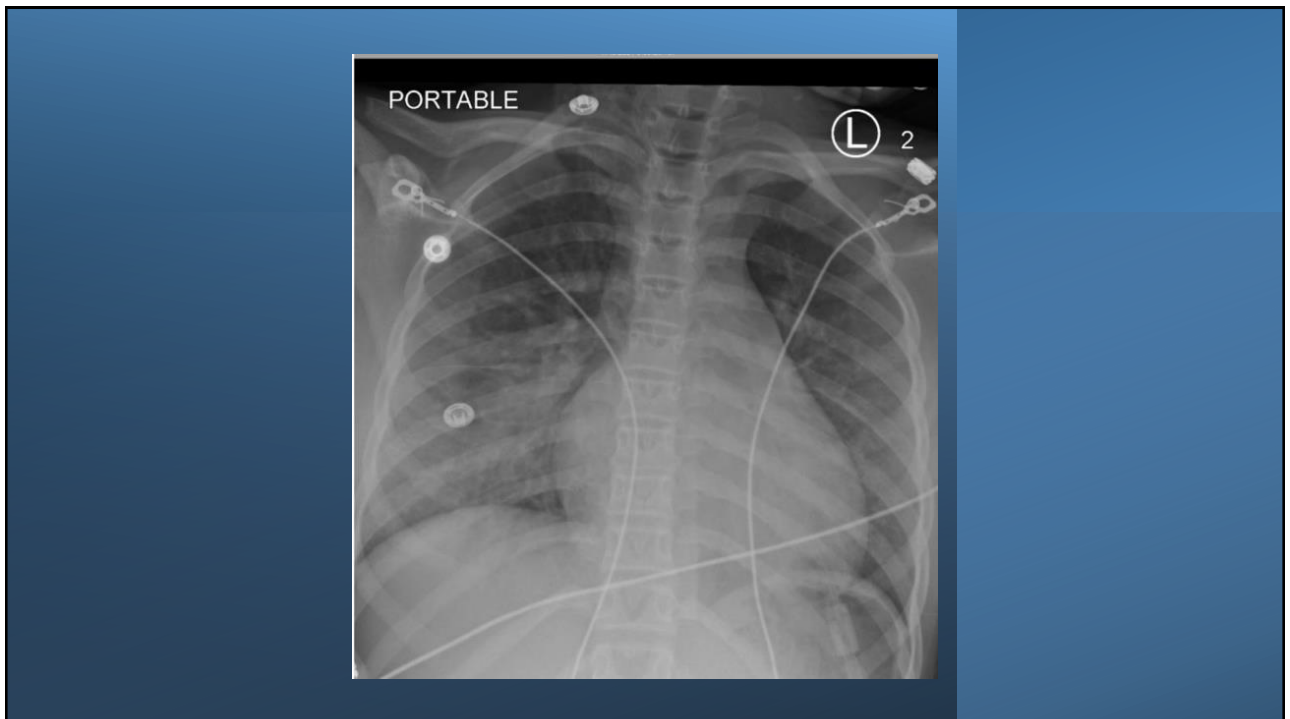
T 38.9, HR 122, BP 85/59, Sats 98% on RA

PE: ill appearing, Lungs: CTA, Heart: tachy, Abd: RUQ discomfort, soft, Ext: no edema

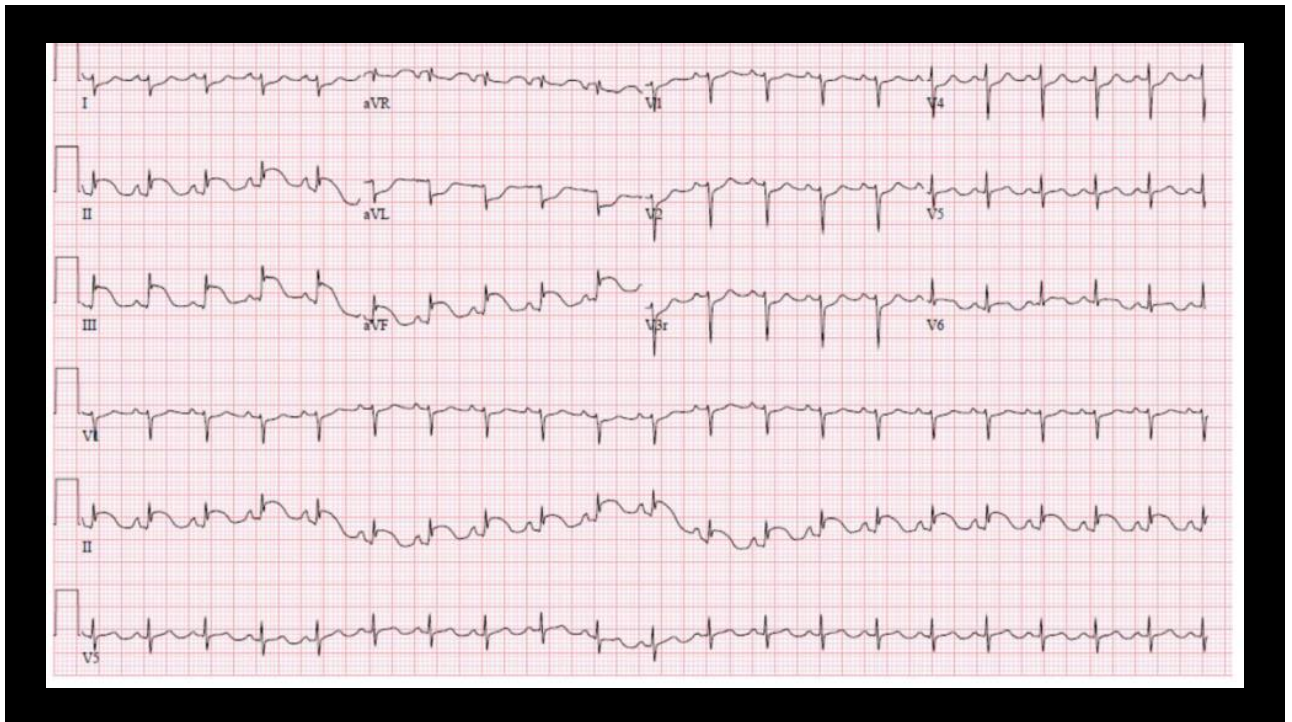
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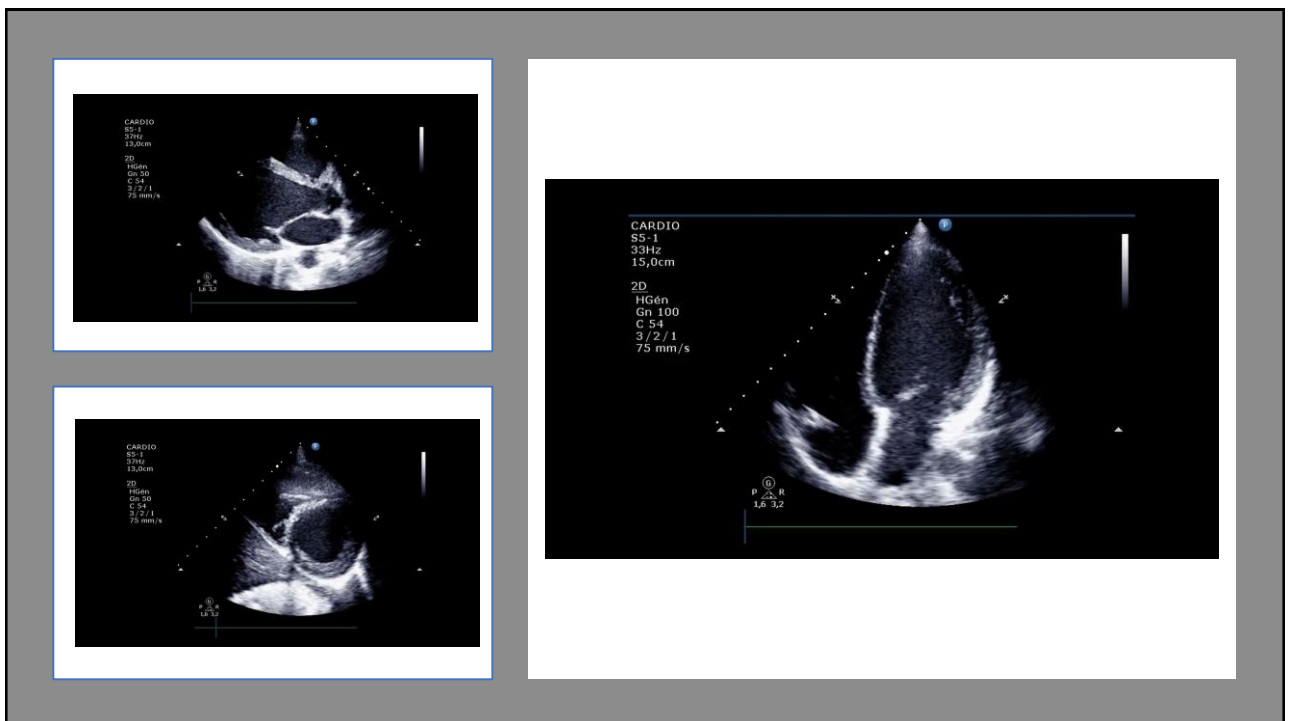
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22



23



24

&lt; 21yr

Fever &gt; 24h

Inflammation

Multisystem

No other diagnosis

Recent or current COVID OR recent exposure (4 weeks)



25

Last updated with cases reported to CDC on or before March 1, 2022\*

TOTAL MIS-C PATIENTS MEETING  
CASE DEFINITION\*

7,459

TOTAL MIS-C DEATHS MEETING CASE  
DEFINITION

63

\*Additional patients are under investigation. After review of additional clinical data, patients may be excluded if there are alternative diagnoses that explained their illness.

Total Cases  
79,346,678

Total Deaths  
965,336

As of 3/14/20222

26

## Patient Profile

Median age 9

- 50% 5-13yrs

58% Hispanic or African American

60% male

68% present in shock

27

## Risk

- 15.7 times higher with COVID 19
- 37 times higher <16yr
- 7 times higher 16-39yrs
- Males >females

Boehmer TK, Kompaniyets L, Lavery AM, et al. Association Between COVID-19 and Myocarditis Using Hospital-Based Administrative Data — United States, March 2020–January 2021. MMWR Morb Mortal Wkly Rep 2021;70:1228–1232. DOI: <http://dx.doi.org/10.15585/mmwr.mm7035e5exte>

28

# MIS-C

- 50-70% Myocarditis
- 47% vasopressors
- 41% decreased left ventricular function
- 12% coronary artery aneurysms
- 3% ECMO

Son MBF et al (2021) Multisystem inflammatory syndrome in children—initial therapy and outcomes. NEJM. <https://doi.org/10.1056/nejmoa2102605>

29

**TABLE 3** Comparison Between Patients With C-VAM and MIS-C

	C-VAM (n = 63)	MIS-C (n = 16)	P
Age, y	15.6 ± 1.8	13.3 ± 4.3	.05
Wt, kg	73.3 ± 19.4	57.1 ± 20.8	.01
Troponin, ng/mL	8.78 ± 9.15	0.67 ± 1.10	<.0001
C-reactive protein, mg/L	37.0 ± 35.4	151.1 ± 119.5	.002
Intensive care length of stay	2.5 ± 1.5	6.6 ± 4.6	.004
LVEF % (echocardiography)	60.9 ± 6.5	45.1 ± 9.5	<.0001
LGE, n (%)	49 (88)	3 (20)	.0005
Myocardial edema, <sup>a</sup> n (%)	47 (83.9)	4 (28.6)	<.0001

Data are reported as mean ± SD, unless specified. LVEF, left ventricular ejection fraction.

<sup>a</sup> As defined by CMR, myocardial mass index ≥ 20 cm<sup>2</sup>/m<sup>2</sup> body surface area.

- As of present, most Vaccine related myocarditis has been self limited and recovery has been very good.

30



## Back to the case

- On arrival to PICU she became hypotensive again
- Started on epi drip
  - PVC's
  - V-Tach Arrest
- Started on ECMO
- Steroids, IVIG
- HD 3 – gases looked better, started milrinone
- HD 5 & 6 – echo showed improving function
- HD 7: weaned ECMO

31

### **Comparison of MIS-C Related Myocarditis, Classic Viral Myocarditis, and COVID-19 Vaccine related Myocarditis in Children**

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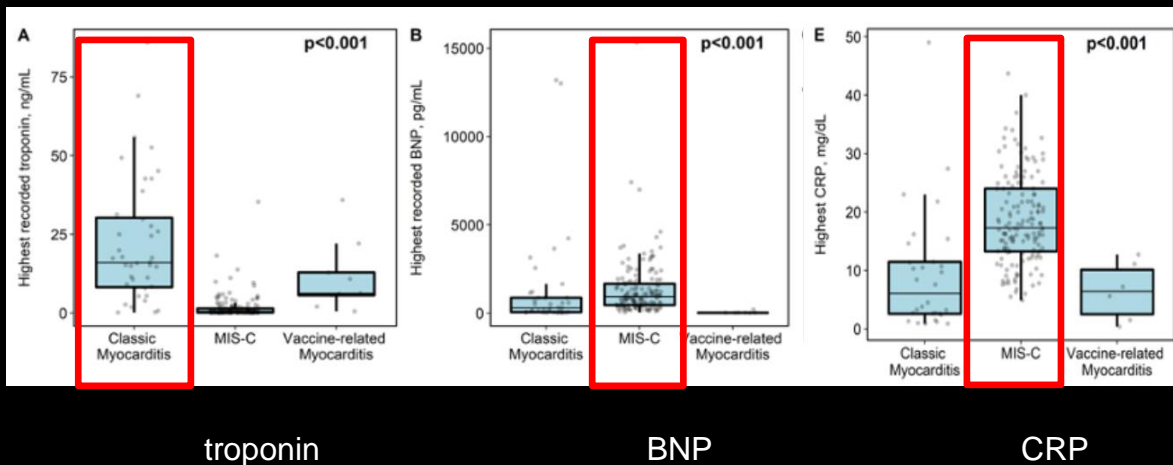
32

# Classic vs Vaccine vs COVID Myocarditis

- 201 patients
  - 43 classic
  - 149 COVID
  - 9 Vaccine

Patel T, et al. Comparison of MIS-C Related Myocarditis, Classic Viral Myocarditis, and COVID-19 Vaccine related Myocarditis in Children.

33



Patel T, et al. Comparison of MIS-C Related Myocarditis, Classic Viral Myocarditis, and COVID-19 Vaccine related Myocarditis in Children.

34

## Patient Profile

	Classic	MIS-C	Vaccine Associated
<b>Age</b>	7.5	14.7	15.5
<b>Male</b>	72.1	63.1	100
<b>African American</b>	53.5	58.1	11.1
<b>White</b>	18.6	16.9	66.7

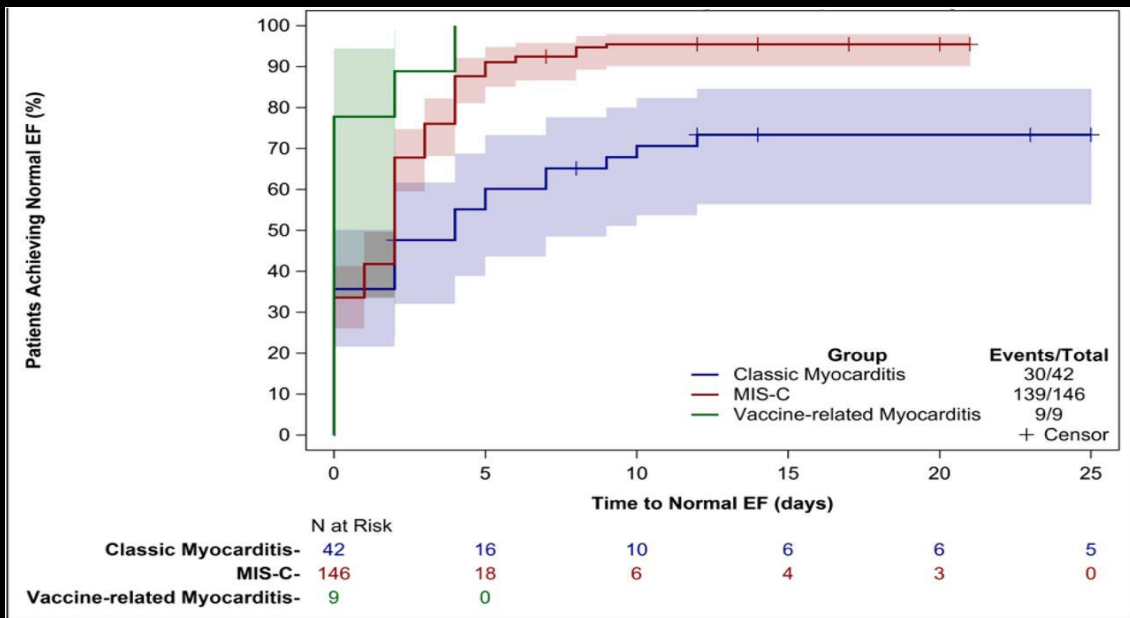
Patel T, et al. Comparison of MIS-C Related Myocarditis, Classic Viral Myocarditis, and COVID-19 Vaccine related Myocarditis in Children.

35

	Classic	MIS-C	Vaccine Associated
<b>Chest Pain</b>	76.2%	10.7%	100%
<b>EF &lt; 55%</b>	58%	42%	22%
<b>Vasopressors</b>	42%	52%	22%
<b>ECMO</b>	21%	2%	0
<b>Normal EF at Discharge</b>	70%	93%	100%
<b>HF meds 3mos post discharge</b>	45%	0.7%	0

Patel T, et al. Comparison of MIS-C Related Myocarditis, Classic Viral Myocarditis, and COVID-19 Vaccine related Myocarditis in Children.

36



37

## Conclusions

- Vaccine related myocarditis is rare as is MIS-C
  - Most common in white, teen males
- Patients with myocarditis related to COVID are more sick with longer ICU stays.
- Preliminary data suggests that patients with classic viral myocarditis are the sickest.
- Long term effects still unknown

38

Thank you to Athina Sikavitsas, DO and Timothy Visclovsky, MD

39



Thank you!  
Questions?

40

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