COVID-19 vaccination

- Subacute sclerosing panencephalitis as a re-emerging condition due to low vaccination coverage: a case-series
- Need for awareness and surveillance of long-term post-COVID neurodegenerative disorders. A position paper from the neuroCOVID-19 task force of the European Academy of Neurology
- The Spectrum and Burden of COVID-19-Associated Neurologic Disease in Australian Children 2020-2023
- Nanoparticle Targeting Strategies for Lipid and Polymer-Based Gene Delivery to Immune Cells In Vivo
- Expression of SARS-CoV-2 spike protein in cerebral Arteries: Implications for hemorrhagic stroke Post-mRNA vaccination
- Growing attention of immunogenicity among patients with autoimmune diseases post-SARS-CoV-2 vaccination: meta-analysis and systematic reviews of the current studies
- An Exceptional Case of a Supra-tentorial Streptococcus Salivarius Brain Abscess-A Case Report
- Age-associated differences in mucosal and systemic host responses to SARS-CoV-2 infection

Cerebral venous sinus thrombosis after Vaccine-induced Immune Thrombotic Thrombocytopenia.

Acceptance of case reports in the European Journal of Neurology is extremely limited, and only reports that make a major clinicopathological or educational contribution or suggest a significant change of diagnosis or therapy will be accepted. We have decided that we will not publish single cases (or small descriptive series) of neurological disorders occurring after vaccination against SARS-COV2 infection.

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107 subjects (median 78 (IQR 58.5-90.5, range 35-105) yo) were recruited, and factors associated with antibody titer after the third mRNA COVID-19 vaccination were analyzed between 49 elderly (age ≥80, median 94 (IQR 86-97, range 80-105) yo) and 58 younger (≤79, median 61 (IQR 46-71, range 35-79) yo) adults.

Among BMI categories, the underweight group in elderly adults had a lower antibody titer compared to the normal weight group ($p < 0.01$ after one, three, and five months). Elderly adults were less likely to maintain effective antibody titer (≥4,160 AU/ml) compared to younger adults; 76% vs 98%, $p < 0.001$ after one month, and 45% vs 78%, $p < 0.001$ after three months. Elderly adults who maintained effective antibody titer for five months had a higher BMI (22.9 kg/m2 vs 20.1 kg/m2, $p = 0.02$), and were less likely to have underweight BMI (0% vs 31%, $p = 0.02$) compared to the subjects who failed its maintenance.

These highlight the impact of nutritional status, and the deleterious effect of being underweight BMI on antibody titer and its maintenance among elderly adults following booster mRNA COVID-19 vaccine [1)]

1)

Mori M, Doi T, Murata M, Moriyama Y, Akino K, Moriyama T, Maekawa T, Doi N. Impact of nutritional status on antibody titer after booster mRNA COVID-19 vaccine among elderly adults in Japan. J Infect Dis. 2023 Nov 14:jiad495. doi: 10.1093/infdis/jiad495. Epub ahead of print. PMID: 37962870.