

Benign Fasciculation Syndrome Developing after COVID Vaccine (Sinovac/CoronaVac)

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ABSTRACT

Benign fasciculation Syndrome (BFS) is related with anxiety level; it is known as fasciculation anxiety syndrome. It may also be caused by long-term use of steroid or anticholinergic, as well as nicotine, caffeine, alcohol, and exposure to insecticides and pesticides. This paper presents a benign fasciculation syndrome case developing after CoronaVac vaccination. A 43-year-old male patient applied to our clinic with complaints of widespread fasciculation in the tongue and entire body developing 1 day after the vaccination. He had no known comorbidity or medication usage. He did not use alcohol, nicotine or caffeine. No muscle weakness or atrophy was found in neurological examination. Deep tendon reflexes were found to be normal. In routine blood tests, Ca, Mg, K, Na, B12, TSH, and T4 values were within the normal limits. Neural transmissions were observed to be normal in EMG (electromyography) examination. Using needle EMG, fasciculation was observed in resting position in all the muscles examined. Motor unite potentials (MUPs) obtained during voluntary contraction were within normal limits. Spinal cord imaging was normal. The patient was taken to follow-up and the fasciculations were completely recovered in 3 weeks by gradually decreasing. The fasciculations were re-started 2 days after the second dose of COVID vaccine and completely recovered in 2 weeks. He did not take any medication or psychotherapy. No relapse was observed.

Keywords: Benign fasciculation syndrome, CoronaVac, Motor unite potentials, Electromyography

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