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Coronavirus (COVID-19) Vaccine-Induced Immune Thrombotic Thrombocytopenia (VITT)

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Coronavirus disease 2019 (COVID-19), the illness caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), continues to have significant morbidity and mortality across the world, with many nations enduring multiple outbreaks of this viral illness. Many vaccines (BNT162b2, mRNA-1273, Ad26.COV2.S, and ChAdOx1 nCoV-19) have been developed at an unprecedented speed using distinctive technologies to prevent COVID-19. This article will highlight the role of the interprofessional team in the management of patients with the rare syndrome of vaccine-induced immune thrombotic thrombocytopenia (VITT).

Objectives:

- Review the epidemiology of VITT.
- Describe the pathophysiology and pertinent clinical features of VITT.
- Review the treatment options in the management of VITT.
- Describe the importance of an interprofessional approach in managing patients affected with VITT that would lead to better patient care and improved outcomes.

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Introduction

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Coronavirus disease 2019 (COVID-19), the illness caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), continues to cause significant morbidity and mortality across the world, with many nations enduring multiple outbreaks of this viral illness. Besides the importance of infection control measures to prevent or decrease the transmission of SARS-CoV-2, the most crucial step to contain this global pandemic is by vaccinating individuals to prevent SARS-CoV-2 infection in communities across the world. Many vaccines have been developed at an unprecedented speed using distinctive technologies to prevent COVID-19. Vaccination triggers the immune system resulting in the production of neutralizing antibodies against SARS-CoV-2. Four vaccines, namely the BNT162b2, mRNA-1273, Ad26.COV2.S and ChAdOx1 nCoV-19 have been approved or granted emergency use authorization(EUA) to prevent COVID-19 in many nations worldwide, including the United States. One exception to this is the ChAdOx1 nCoV-19 vaccine, which has not yet received a EUA or approval from the U.S. Food and Drug Administration (FDA) for use in the U.S. The BNT162b2 and mRNA-1273 vaccines are both mRNA-based, while the Ad26.COV2. S and ChAdOx1 nCoV-19 vaccines incorporate replication-incompetent adenoviral vectors in them.