



Lupus anticoagulant is frequent in patients with Covid-19

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Conflict of interest

The authors declare no conflict of interest

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To the editor:

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Patients hospitalized for Covid-19 severe infection are more prone to excessive coagulation activation leading to thrombotic events. Tang et al.¹ discussed the importance of high D-dimer and Fibrin degradation product level to determine the patient prognostic and the risk of thrombosis. However they did not look at lupus anticoagulant (LAC). Zhang et al. described, three cases of thrombosis associated with antiphospholipid antibodies represented by anticardiolipin (aCL) and anti- β 2-glycoprotein I (a β 2GPI)². No lupus anticoagulant was detected in any of the patients. During the recent Covid19 outbreak in Mulhouse (France), we have studied 56 patients diagnosed for Covid 19 using PCR (n=50) or chest CT scan (n=6), for the presence of LAC with DRVVT and sensitive aPTT tests. Twenty-five cases (45%) were LAC positive while aCL or a β 2GPI were detected in only 5 out of 50 tested patients (10%, 3 associated to LAC) using IgG and IgM detection. Acute infections are known to be sometimes associated with transient LAC and anticoagulant therapy is usually not needed³. Detection of LAC with or without aCL or a β 2GPI, in these critically patients, which are characterized by many thrombosis risk factors, highlight the importance of an early anticoagulant therapy.

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AUTHOR CONTRIBUTIONS:

HARZALLAH I. and DRENOU B. collected the data and processed statistics. HARZALLAH I. wrote the manuscript and DRENOU B. and DEBLIQUIS A. revised the manuscript.

CONFLICTS OF INTEREST:

The authors declare that they have no conflicts of interest.