

Next

	Laboratory tests	Radiologic
llary it	ANCA, p29, MPO	Not done
eral	ANCA, p29, MPO,	Mass invol
-	peripheral eosinophilia	sinus ca
eral	ANA, ANCA	Not done
(wall)	Not done	Mass invol
		nasal ca canthus
		nasolacr





Autoimmune disease

FDA Safety Surveillance of COVID-19 Vaccines : DRAFT Working list of possible adverse event outcomes ***Subject to change***

			Deauis
٠	Acute disseminated encephalomyelitis		Pregnancy and birth outcomes
٠	Transverse myelitis		Other acute demyelinating diseases
	Encephalitis/myelitis/encephalomyelitis/		Non-anaphylactic allergic reactions
	meningoencephalitis/meningitis/ encepholaoathy		Thrombocytopenia
	Convulsions/seizures		Disseminated intravascular coagula
	Stroke		Venous thromboembolism
	Narcolepsy and cataplexy	2.5	Arthritis and arthralgia/joint pain
	Anaphylaxis		Kawasaki disease
	Acute myocardial infarction		Multisystem Inflammatory Syndron
	Myocarditis/pericarditis		in Children
			Vaccine enhanced disease

following and summarised in Fig Baa1602. Algorithm for the treatment of eosinophilia. There is no consensus on the absolute level of eosinophils, because heart damage (Flaum et al, 1981; Brito-Babapulle, 2003.) There is some evidence of urgent treatment in © considered necessary in completely asymptomatic patients (Gotlib, The absolute level of eosinophils, because heart damage has the absolute level of eosinophils does not correlate well with the degree or risk of organ damage (Flaum et al, 1981; Brito-Babapulle, 2003.) There is some evidence of urgent treatment of eosinophils, does not correlate well with the degree or risk of organ damage (Flaum et al, 1981; Brito-Babapulle, 2003.) There is some evidence of urgent treatment in © considered necessary in completely asymptomatic patients (Gotlib, The absolute level of eosinophils, because heart damage has been as the absolute evel with the degree or risk of organ damage (Flaum et al, 1981; Brito-Babapulle, 2003.) There is some evidence of urgent treatment in © considered necessary in completely asymptomatic patients (Gotlib, There is some evidence of urgent treatment in © considered necessary in completely asymptomatic patients (Gotlib, There is some evidence of urgent treatment in © considered necessary in completely asymptomatic patients (Gotlib, There is some evidence of urgent treatment in © considered necessary in completely asymptomatic patients (Gotlib, There is some evidence of urgent treatment in © considered necessary in completely asymptomatic patients (Gotlib, There is some evidence of urgent treatment in © considered necessary in completely asymptomatic patients (Gotlib, There is some evidence of urgent treatment in © considered necessary in completely asymptomatic patients (Gotlib, There is some evidence of urgent treatment in © considered necessary in completely asymptomatic patients (Gotlib, There is some evidence of urgent treatment in Constraints). been found to relate to a count of degranulated eosinophils of 1 × 109/l or more (Spry et al, 1983). In the absence of damage from identification count of eosinophils and reduce to issue indicate when or if the treatment is required. The goal of the rap is to reduce to indicate when or if the treatment is required. The goal of the rap is to reduce to indicate when or if the treatment is required. The goal of the rap is to reduce to indicate when or if the treatment is required. The goal of the rap is to reduce to indicate when or if the treatment should be initiated. However, in cases with significant or gulmonary, emergency treatment is required. The goal of the rap is to reduce to indicate when or if the treatment should be initiated. High-dose corticosteroids are the main emergency treatment and can be indicated while waiting for the results of initial investigations. The evidence for its use is limited and largely restricted to numerous reports of cases and series of small cases, many of which were published prior to the understanding of the reduce the last of the results of initial investigations. The evidence for its use is limited and largely restricted to numerous reports of cases and series of small cases, many of which were published prior to the understanding of the regard to be produced to decrease effort is use is limited and largely restricted to numerous reports. Although there is no evidence for the use of corticosteroids in roduces exclarate restrictions of the equation of the requires of the equation of the regard to decrease effort is used and there is no evidence for the use of corticosteroids in roduces exclarate restriction of the requires of the reatement of the reatement of the restrict is the reative damage for the use of the reatement of the restrict and there is no evidence of the reatement of the restrict and there is no evidence of the reatement of the reatement of the restrict and there is no evidence of the reatement of the reatement of the restrict and there is no evidence of the methylprednisolone. Otherwise, the oral prednisolone © Wow. © oado at a dose of $0 \cdot 5 \, \text{eff}$ 1° mg / kg / day for 1 \hat{e} 2 hours. in extreme eosinophilia, consideration could be given to concomitant administration of alopurinol for a short period. 2 months of 2 m

 a reports (Zabel & Schlaak, 1991; Hosokit al, 1997; Hosokit al, 1997; Fukuta et al, 2001) and when used as a modeling agent for steroids (information, limited to case reports. Cyclosporine impairs the activation of the T©cell, given its value in lymphotic multivariant HES. There are also reports. Cyclosporine impairs the activation of the t al, 1997; Hosokit al, 1997; Fukuta et al, 1997; Hosokit al, 1997; Fukuta et al, 1997; Hosokit al, 1997 Immunosuppressive agend, despite a relative scarcity of published, jublished interfactors, closporta & Bateria, bateria by hyperpendicular metric metr to Lince clinical response in the negative FIP1L1-PD, Writerfield, J.H. weiler, C.R. (2012) use of interferon peguilate in hypercosinophilic syndrome. lengative grants and clinical immunology, 96, 1316. checkley, A.M., choidini, P.L., diver, B., Guand, D., methy, S., Guand, D., Society of infection and hospital of the returned tandpost point from makers, C. (2010) essionsphilic syndrome. lengative study for processionsphilic syndrome. lengative study for processionsphilic syndrome. lengative study for thy constructions of the unitar sessences, 31, 127) 1129. butterfield, J.H. weiler, S., Guand, M., Kim, A.S., Dave, U.P., Thomas, K. W. (2012) The systematic display for tyrosine rearrangement. Infection display for three and hospital of three sesses. The Journal of Allergy and Clinical immunology, 56, 1316. checkley, A. M., Chordin, B., Cave, A., Guand, M., Logand, K., W. (2012) The systematic display for tyrosine rearrangement. Infection display for three and hospital of three sesses. The Journal of Allergy and Clinical immunology, 56, 1316. checkley, A. M. Guind, M. J., Dale, D.C., West, B. C. Wolff, S. M. (2015) The heuration by Teolis in hypercosinophilic syndrome. lengative stranged for the semical interferon of phypercosinophilic syndrome. lengative stranged for the semical interferon of phypercosinophilic syndrome. lengative stranged for the semical stranged for the semical interferon of phypercosinophilic syndrome. lengative stranged for the semical strange for the semical stranged for the G., M., Francuz, T., Dzaczkowsko Stackel, J., Soy, A. & Kyrcz-Krzemines, S. (2014) Peatures and Result clinics. 292, 1152. Horeandez-Rodriguez, J., Abba, M., Syntawik, S., Sonda, K., Strackel, S., Soy, A. & Kyrcz-Krzemines, S. (2014) Peatures and Result clinics. 292, 1152. K 1155.
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