

25 November 2022

Dr Mona Kaur
GP2U
Level 2
38 Montpellier Road
BATTERY POINT TAS 7004

Re: Mr Muris Boric
5 Welsh Crescent
PARA HILLS SA 5096
Mobile: 0422349123
DOB: 11/11/1985
SA Heart: 499645

Dear Mona

Cardiovascular Diagnosis

1. Probable pericarditis secondary to mRNA vaccine
2. Normal cardiac MRI March 2022

Cardiovascular Risk Factors

1. Nil

Other Diagnoses

1. Anxiety

Medications

Colchicine when necessary

Thank you very much for asking me to see Muris who is a 37-year-old gentleman with probable pericarditis following his 1st Moderna Covid vaccine. He otherwise has no significant cardiac history and no cardiovascular risk factors.

He has been investigated fairly thoroughly over the last 12 months including a cardiac MRI which was normal and normal echocardiogram. He has presented to hospital on a couple of occasions with chest pain and shortness of breath. He had a negative CTPA and at no time was there ever any evidence of ischaemia. Unfortunately he continues to have chest pains almost exclusively with exertion. His exercise capacity has dropped off significantly and is only slowly improving. He was riding his bike up to 15 km every day and he is now unable to do any bike riding at all. He has had no symptom suggestive of heart failure and no palpitations, presyncope or syncope. He describes that pain as a left-sided burning sensation which does resolve with rest. Because of his symptoms he has been unable to work and this has been a very stressful time for him.

On examination today his blood pressure was 136/85 with a regular heart rate of 104 bpm. His heart sounds were dual with no added sounds and there was no evidence of heart failure. There was no pericardial friction rub present. His chest was clear throughout on auscultation. His peripheral pulses are readily palpable and there were no carotid bruits.

His ECG today shows normal sinus rhythm with a normal axis and no ischaemic changes. The corrected QT interval was within normal limits.

I suspect that Muris' pains are not cardiac and I have reassured him of this today. I have organised for him to have a CT coronary angiogram to ensure there is no significant obstructive coronary disease. This will also help further stratify his cardiovascular risk. He appears to have a non-specific inflammatory syndrome related to the vaccine, and in my limited experience with this, this seems to improve over time and I would be hopeful that would be the case with Muris. He is very anxious about his symptoms and I suspect this is playing a part with his chest pain as well. I will contact him with results of the CT scan and keep you up-to-date with his progress. Please contact me if you have any questions and thank you again for your referral.

Yours sincerely



DR JONATHAN CHERRY
MBBS FRACP FCSANZ