Letter to the Editor

Before attributing COVID-19-related ischemic stroke to hypercoagulability alternative causes should be excluded

A R T I C L E  I N F O

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We thank Landstrasse et al. for their interest in our work and for raising concerns regarding attributing Corona Virus Disease 2019 (COVID-19) related ischemic stroke to hypercoagulability.

All the four patients described were on continuous cardiac monitoring during hospitalization and EKG on admission showed no atrial fibrillation or other arrhythmias. Patient 1 had elevated hypercoagulability and an event monitor which did not show atrial fibrillation. Patient 1 in the article had severe infection and respiratory failure. We recognized that COVID-19 can be a cause of ischemic stroke and we did not mention that this happens “ONLY” in severe infection. There are many articles connecting ischemic stroke to COVID-19 (Avula et al., 2020).

We would not speculate that the prevalence of ischemic stroke has declined during the COVID-19 pandemic but we are of the opinion that the number of patients seeking medical care has decreased. As suggested by Siegler et al. the number of patients with ischemic stroke has declined in one tertiary center during the COVID-19 pandemic but that seems because a smaller number of patients seeking health care evaluation for mild symptoms (Siegler et al., 2020). Underutilization of healthcare resources is also observed during the COVID-19 pandemic (Onteddu et al., 2020). Given the nature of COVID-19 pandemic, this question can only be answered with further epidemiological research.

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 Declaration of competing interest

The authors declare no conflicts of interest.

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