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Case Report of a Child with Beta Thalassemia Major in a Tribal Region of India

Introduction: Thalassemia is an inherited blood disorder of haemoglobin (Hb) synthesis, which affects different regions around the world. India has the largest number of children with beta-thalassemia major in the world, particularly in the tribal population. Heterozygous conditions are milder and even go unreported than the condition of homozygous where regular blood transfusion is required.

Case report: This report focuses on a case of major beta-thalassemia in a child, whose parents are beta thalassemia minor to intermediate conditions, and who was treated by blood transfusion once a month. However, Thalassemia may be cured by allogeneic hematopoietic stem cell transplantation, although not everyone is a good candidate. Genetic counselling, prenatal diagnosis, and selective termination of affected fetuses are effective ways to control thalassemia.

Discussion and conclusion: The paper reports a unique case of Thalassemia in rural India. The blood disorder while commonly presented in a juvenile whose parents were Thalassemia positive resulted in the termination of a fetus diagnosed with it. It archives the story of the parents who are now in the process of planning future offspring while mitigating disease risk. The case leads the way for effective management and containment of hereditary genetic disorders through carrier detection while planning alliances and offspring.

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Male in Early Adolescence Presenting with Guillain-Barré Syndrome Following BECOV2D Vaccine

COVID vaccination has been associated with serious disorders including thrombosis with thrombocytopenia syndrome (TTS), Guillain-Barré syndrome (GBS), and myocarditis. GBS has been reported in adults following COVID-19 infection and rarely following the COVID-19 vaccination. Post COVID vaccination GBS has been associated with prominent and early facial diplegia and quadriplegia. Extension of the COVID vaccination program to the pediatric age group of 5 to 17 years has exposed this population to the adverse effects of the vaccination. Only a few case reports of post-vaccination GBS have been reported in the pediatric age group without any data on the true prevalence. We report a case of a male in his early adolescence with GBS presenting as facial diplegia and rapid quadriplegia following the BECOV2D, (Corbevax) vaccination. Our case is the first case of GBS reported following BECOV2D, (Corbevax) vaccination and highlights the presentation with prominent and early diplegia, which is similar to the presentation in adults.