

Supplemental Material to:

Jessica Leung, Subhadra Siegel, James F Jones, Cynthia Schulte, Debra Blog, D Scott Schmid, Stephanie R Bialek, and Mona Marin

Fatal varicella due to the vaccine-strain varicella-zoster virus

Human Vaccines & Immunotherapeutics 2013; 10(1) http://dx.doi.org/10.4161/hv.26200

www.landesbioscience.com/journals/vaccines/article/26200

Fatal varicella due to the vaccine-strain varicella-zoster virus

Authors: Jessica Leung, MPH¹, Subhadra Siegel, MD², James F. Jones, MD³, Cynthia Schulte, RN, BSN⁴, Debra Blog, MD, MPH⁴, D. Scott Schmid, PhD¹, Stephanie R. Bialek, MD MPH¹, Mona Marin, MD¹

Authors' affiliations:

Supplementary Online Table: Medical History

Data source: Information for medical events occurring before the 7th hospitalization were obtained from the primary care provider's clinical notes. Information on the 7th hospitalization were obtained from the hospital medical records.

Age	Medical History
5 months	1 st hospitalization: RSV bronchiolitis
5.5 months	2 nd hospitalization: RSV pneumonia with hypoxia
6-8 months	3 rd hospitalization: Admitted for neurologic evaluation of hypotonia and
	recurrent aspiration pneumonia
8.5 months-10	4 th hospitalization: Aspiration pneumonia
months	 Gastrostomy tube placed at 9.5 months
	 Muscle biopsy at 9.5 months identified type 2 fiber atrophy consistent
	with primary myopathic process; several types of muscular dystrophy
	excluded
10 months	5 th hospitalization: Pneumonia
12 months	Vaccinated with varicella, measles, mumps, rubella, Haemophilus influenzae
	type b, and pneumococcal vaccines
12 months (7 days	6 st hospitalization: Admitted for respiratory distress
post-vaccination)	 Treated with albuterol, budesonide, and amoxicillin clavulanate
	 On Hospital day 10 (16 days post-vaccination) started on IV
	methylprednisolone for 3 days followed by prednisolone for 2 days
12.5 months (20	Diagnosed with varicella by primary care provider
days post-	Started on oral acyclovir
vaccination)	
12.5 months-15	7 th hospitalization: Admitted with varicella for respiratory distress
months (24 days	Started on IV acyclovir and broad-spectrum antibiotics
post-vaccination; 4	Hospital Day 4: received IV methylprednisolone for 3 days followed by
days after rash	2 doses of prednisolone for 1 day
onset)	Hospital day 11: episode of acute respiratory failure requiring
	intubation
	Hospital day 12: IV acyclovir discontinued
	Hospital day 19: Bronchial lavage specimen positive for vaccine-strain

¹National Center for Immunization and Respiratory Diseases, Centers for Disease Control and Prevention, Atlanta GA

²Department of Pediatrics, New York Medical College, New York, NY

³National Center for Emerging and Zoonotic Infectious Diseases, Centers for Disease Control and Prevention, Atlanta GA

⁴Bureau of Immunization, New York State Health Department, Albany, NY

Age	Medical History
	VZV by PCR; Bronchial alveolar lavage specimen positive for
	Pseudomonas aeruginosa by culture
	Hospital day 21: IV acyclovir re-started
	 Hospital days 23-26: Blood specimens positive for <i>Pseudomonas aeruginosa</i> by culture
	 Hospital day 24: started on low-dose prolonged steroid therapy protocol for acute respiratory distress syndrome
	 Hospital day 34: bronchial lavage specimen positive for VZV by PCR, but not genotyped
	 Hospital days 20-44: urine specimens positive for Candida albicans
	 Hospital days 51-53: blood specimens positive for <i>Pseudomonas aeruginosa</i> by culture
	Hospital day 59: patient expired