

**Letter to Editor : Response to late diagnosis of COVID-19 and
hypercoagulable state**

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Letter to Editor Response

8/15/23, 11:37 AM

Yahoo Mail - Letter to Editor re: CJRT article - response?

Letter to Editor re: CJRT article - response?

Dari: Editor (editor@csrt.com)

Kepada: desdiani@ymail.com

Tanggal: Rabu, 22 Juni 2022 pukul 01.01 GMT+7

Hello Desidani,

We received this Letter to the Editor regarding a prior publication – would you like to send a response to be published alongside? Let me know.

[Late diagnosis of COVID-19 in a 34-year-old man in a hypercoagulable state: A case report](#)

Kind regards,

Carly Brockington

Managing Editor, [Canadian Journal of Respiratory Therapy](#)

(Pronouns: she, her)

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Tel : (613) 808-8833



cjrt-2022-026.pdf
281.3kB

LETTER TO THE EDITOR

Re: Late diagnosis of COVID-19 and hypercoagulable state

Rujittika Mungmunpantipantip^{1,2}, Viroj Wiwanitkit³

R Mungmunpantipantip, V Wiwanitkit. Late diagnosis of COVID-19 and hypercoagulable state. *Can J Respir Ther* 2022;58:84. doi: 10.29390/cjrt-2022-026.

Dear Editor,

We would like to share ideas on the publication "Late diagnosis of COVID-19 in a 34-year-old man in a hypercoagulable state: A case report [1]." According to Desdiani, the increased mortality rate of COVID-19 patients is mostly due to a hypercoagulable state, and early recognition and therapy of the hypercoagulable state, including the use of LMWH, can lessen the severity of COVID-19 symptoms [1]. The patient was first diagnosed with dengue hemorrhagic fever and had thrombocytopenia and increased liver transaminase tests. The delayed diagnosis of COVID-19 because of misclassification as another infection is a serious issue. An early study during the COVID-19 outbreak suggested that misdiagnosis as dengue fever could be a factor in COVID-19 diagnosis delays [2]. In the present study, the hypercoagulability might be due to the disease progression. This finding shows the

difficulty in differential diagnosis between the COVID-19 and dengue since dengue can be the cause of thrombotic thrombocytopenic purpura and multiple inflammatory syndrome [3]. Finally, the chance of concurrent medical problems between COVID-19 and other infections should not be forgotten.

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1. Desdiani D. Late diagnosis of COVID-19 in a 34-year-old man in a hypercoagulable state: a case report. *Can J Respir Ther* 2022 Apr 20;58:49-52. doi: 10.29390/cjrt-2021-028.
2. Joob B, Wiwanitkit V. COVID-19 can present with a rash and be mistaken for dengue. *J Am Acad Dermatol* 2020 May;82(5):e177. doi: 10.1016/j.jaad.2020.03.036.
3. Tee TY, Cader RA. Share thrombotic thrombocytopenic purpura in dengue fever. *Acta Med Indones* 2021 Apr;53(2):208-12.

¹Private Academic Consultant, Bangkok, Thailand;

²Honorary Professor, Dr DY Patil University, Pune, India;

³Adjunct Professor, Joseph Ayobabalola University, Ikeji-Arakeji, Nigeria

Correspondence: Rujittika Mungmunpantipantip, Private Academic Consultant, Bangkok, Thailand. E-mail: rujittika@gmail.com



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Re : Letter to Editor Response (Submitted Article) 23 Juni 2022

8/15/23, 11:41 AM

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Re: Letter to Editor re: CJRT article - response?

Dari: desdiani - (desdiani@ymail.com)

Kepada: editor@csrt.com

Tanggal: Kamis, 23 Juni 2022 pukul 23.56 GMT+7

Dear Carly,

Here we submit a response of letter to the editor.

Thank you for your attention

Regards

Pada Rabu, 22 Juni 2022 01.01.17 GMT+7, Editor <editor@csrt.com> menulis:

Hello Desidani,

We received this Letter to the Editor regarding a prior publication – would you like to send a response to be published alongside? Let me know.

[Late diagnosis of COVID-19 in a 34-year-old man in a hypercoagulable state: A case report](#)

Kind regards,

Carly Brockington

Managing Editor, [Canadian Journal of Respiratory Therapy](#).

(Pronouns: she, her)

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Tel : (613) 808-8833



Response_to Editor.docx
15.9kB

Letter to Editor (Article) Submission

Response to Editorial Board of Can J Respir Ther.

Dear Editorial Board,

Here I would like to give my response to paper by R Mungmunpantip, V Wiwanitkit Late diagnosis of COVID-19 and hypercoagulable state. *Can J Respir Ther* 2022;58:84. (doi: 10.29390/cjrt-2022-026), in which my paper "Late diagnosis of COVID-19 in a 34-year-old man in a hypercoagulable state: A case report" was cited.

Based on the case, this patient was initially treated by an internist in a small hospital and was diagnosed and treated as DHF/dengue fever patient, but there was no improvement and the condition even worsened, oxygen saturation decreased, then the patient was referred to a larger hospital. After a PCR examination, the results were positive, and then the patient was diagnosed and treated as COVID-19 patient, but already had a severe hypercoagulable condition, so the patient couldn't be helped. (1,2,3)

1. Klok FA, Kruip MJHA, Van der Meer NJM, et al. Incidence of thrombotic complication in critically ill ICU patient with COVID-19. *Thromb Res* 2020;191:145–7. doi: 10.1016/j.thromres.2020.04.013
2. Levi M, Thachil J, Iba T, Levy JH. Coagulation abnormalities and thrombosis in patients with COVID-19. *Lancet Haematol* 2020;7(6):e438–40. doi: 10.1016/S2352-3026(20)30145-9.
3. McGonagle D, O'Donnell JS, Sharif K, Emery P, Bridgewood C. Immune mechanisms of pulmonary intravascular coagulopathy in COVID-19 pneumonia. *Lancet Rheumatol* 2020;2(7):e437–45. doi: 10.1016/S2665-9913(20)30121-1.

Response Needed to Letter to Editor 15 Juli 2022

8/15/23, 11:44 AM

Yahoo Mail - Response needed: CJRT-2022-033 edited manuscript and proof

Response needed: CJRT-2022-033 edited manuscript and proof

Dari: Danhua Wang (danhua.wang@cdnsiencepub.com)

Kepada: desdiani@ymail.com

Tanggal: Jumat, 15 Juli 2022 pukul 08.40 GMT+7

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Danhua



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[Response to late diagnosis](#)

[Desdiani](#)

LETTER TO THE EDITOR

Response to late diagnosis of COVID-19 and hypercoagulable state

[Desdiani Desdiani](#)

Faculty of Medicine, Universitas Sultan Ageng Tirtayasa, Cilegon, Indonesia

Correspondence: Desdiani Desdiani, Faculty of Medicine, Universitas Sultan Ageng Tirtayasa, Jalan Jend. Sudirman No.20, RT.10/RW.5, Kotabumi, Cilegon, Banten, Indonesia 42434. Tel: (+62-254) 280330, Fax: (+62-254) 281254, E-mail: desdiani@gmail.com

Dear Editor,

Here-I would like to give my response to [paper by R-Mungmumpuntipantip, and M-Wiwanitkit's Letter to the Editor, "Late diagnosis of COVID-19 and hypercoagulable state" \[1\]-Can J Respir Ther 2022;58:84. \(doi: 10.29390/cjrt-2022-026\), in which which cited my paper "Late diagnosis of COVID-19 in a 34-year-old man in a hypercoagulable state: A case report" \[2\] was cited.](#)

Based on the case, this patient was initially treated by an internist in a small hospital and was diagnosed and treated as DHF/dengue fever patient, **but** however, there was no improvement and the condition even worsened, oxygen saturation decreased, then the patient was referred to a larger hospital. After a PCR examination, the results were positive, and then the patient was diagnosed and treated as COVID-19 patient, but **because the patient** already had a severe hypercoagulable condition, **so** the patient could **n**ot be helped [\[4,2,3,5\]](#).

References

1. Late diagnosis of COVID-19 and hypercoagulable state. *Can J Respir Ther* 2022;58:84. doi: 10.29390/cjrt-2022-026
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Commented [L32]: Author Please define DWF.

Commented [L32]: Author Please define PCR.

LETTER TO THE EDITOR

Response to late diagnosis of COVID-19 and hypercoagulable state

Desdiani Desdiani¹

D Desdiani. Response to late diagnosis of COVID-19 and hypercoagulable state. *Can J Respir Ther* 2022;58:1. doi: 10.29390/cjrt-2022-033.

Dear Editor,

I would like to give my response to Mungmungpantip and Wiwanitkit's Letter to the Editor, "Late diagnosis of COVID-19 and hypercoagulable state" [1], which cited my paper "Late diagnosis of COVID-19 in a 34-year-old man in a hypercoagulable state: A case report" [2].

Based on the case, this patient was initially treated by an internist in a small hospital and was diagnosed and treated as DHF/dengue fever patient; however, there was no improvement and the condition even worsened, oxygen saturation decreased, then the patient was referred to a larger hospital. After a PCR examination, the results were positive, and then the patient was diagnosed and treated as COVID-19 patient, but because the patient already had a severe hypercoagulable condition, the patient could not be helped [3-5].

REFERENCES

1. Late diagnosis of COVID-19 and hypercoagulable state. *Can J Respir Ther* 2022;58:84. doi: 10.29390/cjrt-2022-026
2. Desdiani D. Late diagnosis of COVID-19 in a 34-year-old man in a hypercoagulable state: a case report. *Can J Respir Ther* 2022 Apr 20;58:49-52. doi: 10.29390/cjrt-2021-028.
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Revision Submitted 16 Juli 2022

8/15/23, 11:50 AM

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Re: Response needed: CJRT-2022-033 edited manuscript and proof

Dari: desdiani - (desdiani@ymail.com)
Kepada: danhua.wang@cdnsiencepub.com
Tanggal: Sabtu, 16 Juli 2022 pukul 23.17 GMT+7

Dear Danhua,

Here we submit a correction of our manuscript.

Thank you for your attention

Best Regards,
Desdiani

Pada Jumat, 15 Juli 2022 08.40.56 GMT+7, Danhua Wang <danhua.wang@cdnsiencepub.com> menulis:

Dear Author:

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Response to late diagnosis
Desdiani

LETTER TO THE EDITOR

Response to late diagnosis of COVID-19 and hypercoagulable state

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Faculty of Medicine, Universitas Sultan Ageng Tirtayasa, Cilegon, Indonesia

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Dear Editor,

I would like to give my response to Mungmunpantipantip and Wiwanitkit's Letter to the Editor, "Late diagnosis of COVID-19 and hypercoagulable state" [1] which cited my paper "Late diagnosis of COVID-19 in a 34-year-old man in a hypercoagulable state: A case report" [2]

Based on the case, this patient was initially treated by an internist in a small hospital and was diagnosed and treated as Dengue Hemorrhagic Fever patient; however, there was no improvement and the condition even worsened, oxygen saturation decreased, then the patient was referred to a larger hospital. After a PCR (Polymerase Chain Reaction) examination, the results were positive, and then the patient was diagnosed and treated as COVID-19 patient, but because the patient already had a severe hypercoagulable condition, the patient could not be helped [3-5]

References

1. Mungmunpantipantip R, Wiwanitkit V. Re: Late diagnosis of COVID-19 and hypercoagulable state. *Can J Respir Ther* 2022;58:84. doi:10.29390/cjrt-2022-026
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Article Published 27 Juli 2022

8/15/23, 11:48 AM

Yahoo Mail - RE: Letter to Editor re: CJRT article - PUBLISHED

RE: Letter to Editor re: CJRT article - PUBLISHED

Dari: Editor (editor@csrt.com)

Kepada: desdiani@ymail.com

Tanggal: Rabu, 27 Juli 2022 pukul 04.47 GMT+7

Hi Desidani,

I just posted the final article online at www.cjrt.ca!

Link to PDF <https://www.cjrt.ca/wp-content/uploads/cjrt-2022-033.pdf>

I attached a PDF copy as well.

Have a great day 😊

Carly Brockington

Managing Editor, [Canadian Journal of Respiratory Therapy](http://www.cjrt.ca)

(Pronouns: she, her)

201-2460 Lancaster Road Ottawa, ON K1B 4S5

Tel : (613) 808-8833

From: desdiani - <desdiani@ymail.com>
Sent: June 23, 2022 12:57 PM
To: Editor <editor@csrt.com>
Subject: Re: Letter to Editor re: CJRT article - response?

Dear Carly,

Here we submit a response of letter to the editor.

Thank you for your attention

Regards

Pada Rabu, 22 Juni 2022 01.01.17 GMT+7, Editor <editor@csrt.com> menulis:

Hello Desidani,

We received this Letter to the Editor regarding a prior publication – would you like to send a response to be published alongside? Let me know.

LETTER TO THE EDITOR

Response to late diagnosis of COVID-19 and hypercoagulable state

Desdiani Desdiani¹

D Desdiani. Response to late diagnosis of COVID-19 and hypercoagulable state. *Can J Respir Ther* 2022;58:121. doi: 10.29390/cjrt-2022-033.

Dear Editor,

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REFERENCES

1. Mungmunpantipantip R, Wiwanitkit V. Re: Late diagnosis of COVID-19 and hypercoagulable state. *Can J Respir Ther* 2022;58:84. doi:10.29390/cjrt-2022-026.
2. Desdiani D. Late diagnosis of COVID-19 in a 34-year-old man in a hypercoagulable state: a case report. *Can J Respir Ther* 2022 Apr 20;58:49-52. doi: 10.29390/cjrt-2021-028.
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¹Faculty of Medicine, Universitas Sultan Ageng Tirtayasa, Cilegon, Indonesia

Correspondence: Desdiani Desdiani, Faculty of Medicine, Universitas Sultan Ageng Tirtayasa, Jalan Jend. Sudirman No.20, RT.10/RW.5, Kotabumi, Cilegon, Banten, Indonesia 42434. Tel: (+62-254) 280330, Fax: (+62-254) 281254, E-mail: desdiani@gmail.com




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Letter to the Editor

Vol. 58, 2022 - July 26, 2022 EDT

Response to late diagnosis of COVID-19 and hypercoagulable state

Desdiani Desdiani

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