## Dr Omar Malik PhD, FRCP

**Consultant Neurologist** (GMC No: 3276389)

Cromwell Hospital Cromwell Road London SW5 0TU Appts: 0207 460 5700 . 1 Mount Alvernia Hospital Harvey Road Guildford GU1 3LX Appts: 01483 570122

## Correspondence and enquiries to:

83 Hounslow Road, Twickenham TW2 7HA Private Secretary/P.A: phone: 0208 241 9542 fax: 0203 475 3772 Email: natasha.pearson@nhs.net

Clinic Date: 14 August 2025

**Dear Doctor** 

Re: Mr James SAINT

I saw James and his partner as a follow-up at Mount Alvernia Hospital on 14<sup>th</sup> August 2025.

James took a few days to recover from his post-LP headache and is now back to baseline.

I explained to him that I had discussed his radiology with my colleague (Dr Declan Johnson) who agreed that there was indeed evidence of a right-sided cerebellar infarct for which no obvious explanation was forthcoming. This included a recent bubble echo as well as a detailed CT intracranial and extracranial angiogram which has not shown any structural cause for why he would have had a posterior circulation event. This is obviously relevant in the context of his post AstraZeneca vaccine related symptoms.

Additionally Dr Johnson said that he could understand the subtle abnormality in his mid cervical spine which may be the explanation for his clinical myelitis but there were no axials possible. I therefore think it is important for us to get some detailed structural imaging through the cervical spine on a 3 Tesla magnet which I will be arranging at Charing Cross Hospital.

His CSF examination showed a negative cell count, normal protein and glucose, negative Borrelia testing and negative oligoclonal bands. This effectively rules out any long-term underlying autoimmune condition as a cause of his myelitis and it is therefore highly likely that James did indeed have a post AstraZeneca vaccine related myelitis.

This is something we will discuss further when I review him again after his imaging.

Whilst he was being investigated with a CT angiogram it was found that he had significant emphysematous change in his upper thorax. I think that this needs to be looked into and I will therefore be referring him to my colleague (Dr Jonathan Dakin-Mount Alvernia Hospital) for a review.

Yours sincerely,

Qua Malih

Dr O. Malik Consultant Neurologist

Cc: Mr James Saint