

PANLAR 2022 - Abstract Submission

COVID-19

PANLAR2022-ABS-1189

Differences Between The First And The Second Wave Of Sars-Cov-2 Infection In Patients With Immune-Mediated Inflammatory Diseases In Argentina: Data From The Sar-Covid Registry

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Objectives To compare sociodemographic, disease characteristics, course and outcomes of SARS-CoV-2 infection in patients with immune-mediated/autoinflammatory diseases (IMADs) during the first and second waves in Argentina.

Methods SAR-COVID is a national, multicenter, longitudinal and observational registry. Patients ≥ 18 years of age, with diagnosis of a rheumatic disease and confirmed SARS-CoV-2 infection (RT-PCR or positive serology) were consecutively included since August 2020. For the purpose of this report, only patients with IMADs who had SARS-CoV-2 infection during the first wave (defined as cases that occurred between March 2020 and March 2021) and the second wave (cases occurred between April and August 2021) were considered. Sociodemographic and clinical characteristics as well as COVID 19 clinical characteristics, complications and outcomes including hospitalization, intensive care unit (ICU) admission, use of mechanical ventilation and death were compared among groups. Variables were compared using Chi squared test and Student T test or Mann Whitney test. Multivariable logistic regression models were carried out with forward and backward selection method, using hospitalization, ICU admission and death as dependent variables.

Results A total of 1777 patients were included, 1342 from the first wave and 435 from the second one. Patients had a mean (SD) age of 50.7 (14.2) years and 81% were female. Both groups of patients were similar in terms of socio-demographic features, disease diagnosis, disease activity, the use of glucocorticoids ≥ 10 mg/day and the immunosuppressive drugs (Table below). Patients infected during the first wave had more comorbidities (49% vs 41%; $p=0.004$). Furthermore, hospitalizations due to COVID 19 (31% vs 20%; $p<0.001$) and ICU admissions (9% vs 5%; $p=0.009$) were higher during the first wave. No differences in the use of mechanical ventilation (16% vs 16%; $p=0.97$) or mortality rate (5% vs 4%; $p=0.41$) were observed. In the multivariable analysis, after adjusting for demographics, clinical features and immunosuppressive treatment, patients infected during the second wave were 40% less likely to be hospitalized (OR= 0.6, IC95% 0.4-0.8) and admitted in the ICU (OR= 0.6, IC95% 0.3-0.9).

Conclusion During the second COVID-19 wave a decrease in the rate of general hospitalization and ICU was observed among patients with IMADs, probable as a result of vaccination and improved treatments.

Reference 1 Isnardi CA et al. Epidemiology and outcomes of patients with rheumatic diseases and SARS-COV-2 infection: data from the argentinean SAR-COVID Registry. Ann Rheum Dis, 2021, suppl 1, 887.