

PANLAR 2022 - Abstract Submission

COVID-19

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Is Psoriatic Arthritis A Risk Factor For Severe Covid -19 Infection?

Data From The Argentine Sar-Covid Registry

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Objectives To describe characteristics of patients with PsA with SARS-CoV-2 and to identify variables associated with poor COVID-19 outcomes.

Methods Cross-sectional study including patients with PsA and RA, who had SARS-CoV-2 infection from the SAR-COVID registry. The ordinal scale of the National Institute of Allergy and Infectious Diseases (NIAID) was used. Patient met the primary outcome, if they presented categories 5 or higher. Chi2 test, Fisher's test, Student's test or Wilcoxon test, and binomial logistic regression using NIAID \geq 5 as dependent variable were performed.

Results A total of 129 PsA patients and 808 with RA were included. The frequency of NIAID \geq 5 was comparable (PsA 19.5% vs RA 20.1%; $p=0.976$). PsA patients with NIAID \geq 5 in comparison with NIAID $<$ 5 were older (58.6 ± 11.4 vs 50 ± 12.5 ; $p=0.002$), had more frequently hypertension (52.2% vs 23%; $p=0.011$) and dyslipidemia (39.1% vs 15%; $p=0.017$). In the multivariate analysis, age (OR 1.06; 95% CI 1.02–1.11) was associated with a worse outcome in patients with PsA, while those who received methotrexate (OR 0.34 ; 95% CI 0.11–0.92) or biological DMARDs (OR 0.28; 95% CI 0.09–0.78) were associated with mild disease.

Table

	PsA (n=129)	RA (n=808)	P	Total (n=937)
Age (years)	51.7 (12.7)	53.1 (12.9)	0.239	52.9 (12.9)
Female	72 (55.8)	684 (84.7)	<0.001	756 (80.7)
Comorbidities	65 (50.4)	355 (43.9)	0.203	420 (44.8)
BMI \geq 30	19 (15.2)		0.692	121 (13.7)
BMI \geq 40	1 (0.8)	10 (1.3)	1	11 (1.25)
Hypertension	35 (28.5)	205 (26.8)	0.783	240 (27.0)
Diabetes	16 (13.0)	67 (8.8)	0.188	83 (9.39)
Dyslipidemia	24 (19.5)	102 (13.5)	0.106	126 (14.4)
Cardio or cerebrovascular disease	5 (11.4)	32 (3.9)	0.033	37 (4.2)
Lung disease	12 (9.8)	73 (9.6)	1	85 (9.6)
Cancer	2 (1.6)	12 (1.6)	1	14 (1.6)
Two or more comorbidities	55 (42.6)	219 (27.1)	<0.001	274 (29.2)
Current smoking	4 (3.6)	60 (8.4)	0.79	64 (7.7)

High disease activity	0 (0)	29 (3.8)	0.027	29 (3.23)
Glucocorticoid	5 (20.0)	95 (60.1)	<0.001	100 (54.6)
Conventional DMARDs	47 (36.4)	443 (54.8)	<0.001	490 (52.3)
Biologic DMARDs	60 (46.5)	193 (23.9)	<0.001	253 (27.0)
JAK inhibitors	4 (3.10)	72 (8.9)	0.038	76 (8.1)
Full recovery of COVID-19	105 (84.0)	644 (81.7)	0.127	749 (82.0)
COVID-19 complications	16 (12.5)	68 (8.7)	0.227	84 (9.2)
Death due to COVID-19	1 (0.8)	34 (4.3)	0.074	35 (3.8)

Image 1



Figure 1. COVID -19 severity according to the ordinal scale of the National Institute of Allergy and Infectious Diseases (NIAID) in PsA and RA patients.

Conclusion Although PsA patients had a higher frequency of cardiovascular and metabolic comorbidities than those with RA, no differences regarding COVID-19 severity was observed. Most patients had mild COVID-19 with a low death rate.