COVID-19-related death in Rheumatic and Musculoskeletal diseases (RMDs)

In common with the general population, older age was more closely linked to COVID-19-related death.

Out of those who died, 69% were over the age of 65.

People with RMDs should continue taking their medication unless told otherwise by the rheumatologists and other health professionals managing their care.

Higher risk for men compared to women.

3,729 People with RMDs and COVID-19 were studied.

Higher risk for men compared to women.

Most RMD medications were not associated with COVID-19-related death.

People with lower RMD disease activity or in remission were less likely to die from COVID-19 compared with those with higher disease activity, highlighting the importance of adequate disease control.

Most RMD medications were not associated with COVID-19-related death.

3 or more comorbidities (additional medical conditions) were also more common in people who died from COVID-19.

Hypertension combined with cardiovascular disease and chronic lung disease were the most relevant comorbidities.

People with RMDs under certain medications may have a higher risk of severe COVID-19 disease.

Caution may be required with Rituximab, some immunosuppressants, and possibly Sulfasalazine.

Although, disease severity and comorbidities may have also contributed to these reported associations.


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