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## COVID BREAKTHROUGH INFECTIONS: RMD NOT NECESSARILY A RISK GROUP FOR SEVERE COVID-19

**Prospective and registry data shared at EULAR 2022 support vaccine recommendations**

**COVID-19 is the disease caused by SARS-CoV-2 infection. Despite a wealth of vaccination data now available, concerns have been raised regarding risks of COVID-19 breakthrough infections in vaccinated patients with immune-mediated inflammatory rheumatic diseases (IRDs) treated with immunosuppressants. Two groups chose to share their findings at the EULAR Congress. These abstracts suggest that most patients with IRDs should not necessarily be seen as a risk group for severe COVID-19, and support the general recommendations to reduce the risk of severe infection by administering three doses of vaccine – especially in older patients, and those receiving immunomodulatory treatment.**

Laura Boekel and colleagues pooled data from two large ongoing prospective cohort studies and analysed post-vaccination serum samples for evidence of breakthrough infection. They report that the incidence of breakthrough infections was comparable between patients taking immunosuppressants and controls. Hospitalization was required in similar proportions in both groups – and in general hospitalized cases were older, and had more comorbidities compared with non-hospitalized cases.

Hospitalization rates were significantly higher among patients treated with anti-CD20 therapy compared to any other immunosuppressant. Although anti-CD20 therapy might increase susceptibility to severe COVID-19 breakthrough infections, the authors argue that traditional risk factors continue to make a critical contribution. With this in mind, most patients with IRDs should not necessarily be seen as a risk group for severe COVID-19, and integrating other risk factors should become standard practice when discussing treatment options, vaccination, and adherence to infection prevention measures with patients.

Breakthrough infection data was also presented by Dr Rebecca Hasseli, with a focus on the German COVID-19-IRD registry as of 31<sup>st</sup> January 2022. In total, 271 cases of breakthrough infections were reported, of whom 91% had received two doses of vaccines, and 9% patients three doses, and the median time from last vaccine dose to infection was 148 days.

Although the rate of comorbidities and median age were higher in triple-vaccinated patients, infected patients showed a lower rate of hospitalization, COVID-19 related complications, need of oxygen treatment, or death.

These results support the general recommendations to reduce the risk of severe COVID-19 disease by administering three doses of vaccine, especially in patients with older age, presence of comorbidities, and those on immunomodulatory treatment.

**Source**

Boekel L, et al. COVID-19 breakthrough infections in vaccinated patients with immune-mediated inflammatory diseases and controls. Presented at EULAR 2022; abstract OP0178.

Hasseli R, et al. Characteristics and outcomes of SARS-CoV-2 breakthrough infections among double and triple vaccinated patients with inflammatory rheumatic diseases. Presented at EULAR 2022; abstract OP0179.

**About EULAR**

EULAR – the European Alliance of Associations for Rheumatology – is the European umbrella organisation representing scientific societies, health professional associations and organisations for people with rheumatic and musculoskeletal diseases (RMDs). EULAR aims to reduce the burden of RMDs on individuals and society and to improve the treatment, prevention and rehabilitation of RMDs. To this end, EULAR fosters excellence in education and research in the field of rheumatology. It promotes the translation of research advances into daily care and fights for the recognition of the needs of people with RMDs by the EU institutions through advocacy action.

**About the EULAR European Congress of Rheumatology**

Since its introduction in 2000, the annual EULAR European Congress of Rheumatology has become the primary platform for exchange of scientific and clinical information in Europe. It is also a renowned forum for interaction between medical doctors, scientists, people with arthritis/rheumatism, health professionals and representatives of the pharmaceutical industry worldwide. The EULAR congress is usually held in June in one of the major cities in Europe.

The scientific programme covers a wide range of topics on clinical innovations, clinical, translational and basic science. Meetings set up by associations of people with arthritis/rheumatism, health professionals and the health care industry complement the programme. The poster sessions, offering lively interaction between presenters and participants, are regarded by many as the heart of the congress.

Over the years, the EULAR Congress has gained a reputation of being a most innovative platform for the practicing physician particularly with respect to the acquisition of information on novel clinical research. The congress attracts more than 18,000 delegates from more than 130 countries.

The aim of the EULAR European Congress of Rheumatology is to provide a forum of the highest standard for scientific, both clinical and basic, educational, and social exchange between professionals involved in rheumatology, liaising with patient organisations, in order to achieve progress in the clinical care of people with rheumatic diseases.

**Contact**

EULAR Communications, [communications@eular.org](mailto:communications@eular.org), Tel. +41 44 716 30 30

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