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COVID-19 MORBIDITY AND MORTALITY IN PEOPLE WITH RHEUMATIC DISEASES: NEW DATA AND INSIGHTS FROM SPAIN AND SWEDEN

Population-based data shared at the EULAR 2021 congress

The COVID-19 pandemic caused by the severe acute respiratory syndrome coronavirus 2 virus (SARS-CoV-2) is of particular concern for people with inflammatory diseases, and there are concerns that these people may be at higher risk and have poorer outcomes. However, at present the implications remain poorly understood. Population-based data from Spain show individuals with rheumatoid arthritis (RA) had an increased risk of COVID-19 diagnosis and hospitalization compared to the general population. Similarly, data from the ARTIS database in Sweden show risks of severe COVID-19 were increased among people with inflammatory joint diseases.

Arani Vivekanantham and colleagues investigated the association between RA and the risk of COVID-19 diagnosis, hospitalization with COVID-19, and COVID-19-related death. This population-based cohort study including all individuals registered in the Information System for Research in Primary Care (SIDIAP) – which covers over 80% of the population of Catalonia, Spain. This information was linked to region-wide SARS-CoV-2 testing, hospital and mortality records. Outpatient diagnoses of COVID-19, hospitalizations and deaths with COVID-19 were identified between 1st March and 6th May 2020.

A total of 5,586,565 people were identified, of which 16,344 had RA. Having RA was positively associated with being diagnosed with COVID-19, and being hospitalized with COVID-19. However, the authors did not find an association between RA and the risk of worsening from outpatient diagnosis to hospitalization or death, or from hospitalization to death.

The authors believe this is the largest study performed to date looking at COVID-19 outcomes in people with RA. Further research is needed to address factors linking RA and COVID-19 outcomes, including the presence of other comorbidities, underlying RA disease activity, and the use of immunosuppressive medications.

A second poster from Bower and colleagues looked at all-cause mortality, absolute and relative risks for severe COVID-19 in people with chronic inflammatory joint diseases, compared both over time and to the general population. Using data from ARTIS – a Swedish national database – data on hospitalizations, admission to intensive care, and deaths due to COVID-19 were analysed in 110,567 people with inflammatory joint disease, including RA, psoriatic arthritis, ankylosing spondylitis, spondyloarthritis, or juvenile idiopathic arthritis. These were compared to outcomes for 484,277 people in the general population.

In all groups, the absolute risk of death from any cause in 2020 was higher than 2015–2019, with a peak in mid-April, but the relative risks of death versus the general population remained similar. Among people with inflammatory joint disease in 2020, the risk of hospitalization, admission to intensive care, and death due to COVID-19 was 0.5%, 0.04% and 0.1%, respectively.

Following the original abstract submission, Dr. Bower adds an update that among people with inflammatory joint disease in 2020, the risk of hospitalization, admission to intensive care, and death due to COVID-19 was 0.3%, 0.03% and 0.07%, respectively.

Source:

Vivekanantham A, et al. Rheumatoid arthritis and the risk of COVID-19 diagnosis, hospitalisation and death: a population-based multi-state cohort analysis including 5,586,565 people in Catalonia, Spain. Presented at EULAR 2021; poster POS0053.

Bower H, et al. Impact of the COVID-19 pandemic on morbidity and mortality among Swedish patients with inflammatory joint diseases versus the general population. Presented at EULAR 2021; poster POS1169.

About EULAR

EULAR 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 ([see previous congresses](#)).

The [scientific programme](#) at the congress 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 Press, press@eular.org, Tel. +41 44 716 30 36

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