

# Cardiac injury linked to increased mortality in COVID-19

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greater proportion of those with cardiac injury required noninvasive mechanical ventilation (3.9 versus 46.3 percent) or invasive mechanical ventilation (4.2 versus 22 percent). Patients with cardiac injury more often had [complications](#) and had higher mortality compared with those without cardiac injury (51.2 versus 4.5 percent). The risk for [death](#) was increased among [patients](#) with versus without cardiac injury during the time from symptom onset and from admission to end point (hazard ratios, 4.26 and 3.41, respectively).

"Although the exact mechanism of cardiac injury needs to be further explored, the findings presented here highlight the need to consider this complication in COVID-19 management," the authors write.

**More information:** [Abstract/Full Text](#)

(HealthDay)—Cardiac injury is associated with increased mortality in hospitalized patients with coronavirus disease 2019 (COVID-19), according to a study published online March 25 in *JAMA Cardiology*.

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Shaobo Shi, M.D., from Renmin Hospital of Wuhan University in China, and colleagues explored the association between cardiac injury and [mortality](#) in a cohort study conducted from Jan. 20, 2020, to Feb. 10, 2020. The final analysis included 416 hospitalized patients with COVID-19.

The researchers found that [common symptoms](#) included fever, cough, and shortness of breath (80.3, 34.6, and 28.1 percent, respectively). Overall, 82 patients had cardiac injury; these patients were older, had more comorbidities, and had higher leukocyte counts than patients without cardiac injury. They also had a higher proportion of multiple mottling and ground-glass opacity in radiographic findings (64.6 versus 4.5 percent). Compared with those without cardiac injury, a

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