

ACE inhibitor/ARB use not tied to COVID-19 test positivity

8 May 2020



COVID-19 test positivity in overlap propensity score weighting (odds ratio, 0.97; 95 percent confidence interval, 0.81 to 1.15).

"As there may be a risk to withdrawing these agents, our study, showing no significant greater susceptibility with regard to test positivity, supports the recommendations of several professional societies that have recommended continuation of these medications," the authors write.

One author disclosed financial ties to the pharmaceutical industry.

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

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(HealthDay)—Angiotensin-converting enzyme inhibitor (ACEI) and/or angiotensin receptor blocker (ARB) use is not associated with COVID-19 test positivity, according to a study published online May 5 in *JAMA Cardiology*.

Neil Mehta, M.B.B.S., from the Cleveland Clinic Lerner College of Medicine of Case Western Reserve University, and colleagues examined the association between use of ACEIs/ARBs and the likelihood of testing positive for COVID-19 in a retrospective cohort study with overlap propensity score weighting. Data were included for 18,472 patients tested for COVID-19, of whom 12.4 percent were taking either ACEIs or ARBs.

The researchers observed a positive COVID-19 test result in 9.4 percent of the patients. Of those who tested positive, 24.3, 9.3, and 6.4 percent were admitted to the hospital, admitted to an [intensive care unit](#), and required mechanical ventilation, respectively. There was no significant association for ACEI and/or ARB use with

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