

# Minority patients with rheumatic diseases have worse COVID-19 outcomes

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New research at ACR Convergence, the American College of Rheumatology's annual meeting, reveals that people of color with rheumatic disease have worse health outcomes from COVID-19 infection, are more likely to be hospitalized to treat their coronavirus infection, and are more likely to require invasive ventilator treatment (ABSTRACT #0006).

COVID-19 is the disease caused by the novel SARS-CoV-2 coronavirus. As part of the response to the global pandemic, the rheumatology community launched the COVID-19 Global Rheumatology Alliance physician registry, an international collection of data on patients with [rheumatic diseases](#) who have been diagnosed with COVID-19. These data have been used for a number of studies that clarify how people with rheumatic diseases, many of whom take immunosuppressant drugs to control their conditions, are affected by COVID-19.

People with rheumatic disease, particularly those on immunosuppressants, are may be at higher risk for severe infections. What doctors and their

patients do not know is why.. This new study used the data collected in the registry to determine if patients are more likely to experience more severe outcomes from COVID-19, and to learn if COVID-19 health outcomes vary by race and ethnicity for patients in the United States (U.S.).

"At the time we were examining data from the registry, there was growing attention on the disproportionate impact of COVID-19 among racial/ethnic minorities in the U.S.," says study co-author Milena Gianfrancesco, Ph.D., MPH, Assistant Adjunct Professor at the University of California, San Francisco School of Medicine. "We know that racial/[ethnic minority](#) rheumatic disease patients experience higher risk and disease severity in general. We were interested in examining whether the inordinate burden of COVID-19 also affected this susceptible population. Understanding disparities in COVID-19 outcomes can help us identify vulnerable populations and ensure that patients at high risk are adequately tested and treated."

The study included 694 U.S. patients who were defined as white, Black, Latinx or other race/ethnicity from the global rheumatology registry from March 24 to May 22, 2020. The researchers examined COVID-19 outcomes, including whether patients were hospitalized, required ventilation support such as supplementary oxygen and/or invasive ventilation, and if they died or survived their coronavirus infection. They controlled the data for age, sex, smoking status and rheumatic disease diagnoses (including [rheumatoid arthritis](#), lupus, psoriatic arthritis, ankylosing spondylitis and others). They also controlled data for other common health problems that affect people with rheumatic diseases, such as cardiovascular disease, hypertension, lung disease, diabetes, and chronic renal insufficiency or end-stage renal disease. They also looked at arthritis medications that patients used, including immunosuppressants. The study's data also included each patient's level

of rheumatic disease activity, or if their inflammatory arthritis was in remission, low, moderate or high.

According to the study's findings, people with rheumatic disease who are of racial or ethnic minorities were more likely to experience poor health outcomes from COVID-19 infection, including hospitalization and necessary ventilation support, compared to white patients. Black and Latinx patients had 2.7 and 1.98 higher odds, respectively, of needing hospitalization for COVID-19 compared to whites. Black and Latinx patients had threefold increased odds of needing ventilation support compared to whites. The study found no differences in mortality rates based on race or ethnicity.

"Bringing these results to light will hopefully lead to actionable changes within the rheumatology community and beyond," says Dr. Gianfrancesco. "We need to be sure that patients who are at high risk of severe COVID-19 outcomes have access to testing, treatment and a vaccine when one is eventually available. I would also add that rheumatology providers can be advocates and trusted allies for their patients. They can ensure that patients are aware of [disease](#) risks by providing materials in multiple languages."

**More information:** [acrabstracts.org/abstract/race-and-ethnicity-reported-regional-differences-in-covid-19-outcomes-among-patients-with-rheumatic-diseases](https://acrabstracts.org/abstract/race-and-ethnicity-reported-regional-differences-in-covid-19-outcomes-among-patients-with-rheumatic-diseases)

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