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## NEW EVIDENCE SUPPORTING COVID SEVERITY RISK FACTORS IN PEOPLE WITH DIVERSE RHEUMATIC DISEASES

**New insights shared at the EULAR Congress**

**COVID-19 is the disease caused by SARS-CoV-2 infection. Some factors associated with severe COVID-19 outcomes have been identified in patients with inflammatory and autoimmune rheumatic and musculoskeletal diseases (RMDs), including older age, male sex, comorbidity burden, higher disease activity, and certain medications such as rituximab. New data released at the 2022 EULAR Congress shine a light on some specific factors for people with psoriasis, psoriatic arthritis (PsA), axial spondyloarthritis (axSpA), or idiopathic inflammatory myopathy (IIM).**

Until now, information about the factors associated with severe COVID outcomes in people with psoriasis, PsA, or axSpA have been lacking – including how specific treatments for these conditions might impact outcomes. Professor Pedro Machado presented new data from the COVID-19 PsoProtect and Global Rheumatology Alliance physician-reported registries, confirming that more severe COVID-19 outcomes in this group are largely driven by demographic factors (age, sex), comorbidities, and active disease – as has been seen for other RMDs.

This pooled analysis of data from the two registries included over 5,000 patients. Overall, 14.6% of cases were hospitalised (but survived), and 1.8% died. Modelling revealed that being older and male was associated with more severe outcomes from the infection. People also tended to do worse if they had other underlying diseases, such as hypertension, lung disease, chronic kidney disease, diabetes, or if they were obese. Some elements of the RMD also played a role. For example, people with higher disease activity and those using glucocorticoid medicines also tended to have more severe COVID-19 outcomes. Conversely, there were some variables that were associated with less severe COVID-19 outcomes. This included contracting the infection later in the pandemic compared to those who had COVID before June 2020. Importantly, none of the disease-modifying anti-rheumatic drugs (DMARDs) typically used in people with psoriasis, PsA, or axSpA, were associated with severe COVID-19 outcomes; this included IL-17i, IL-23/IL-12+23i, JAKi, and apremilast.

Dr Su-Ann Yeoh and colleagues also examined the COVID-19 Global Rheumatology Alliance physician-reported registry to report on the factors associated with severe COVID-19 outcomes in 348 people with IIM. These are the first global registry data on the impact of COVID-19 in this patient population. As with other RMDs, people who were older, male, and had higher comorbidity burden or disease activity had worse outcomes from COVID-19 infection. Again, higher glucocorticoid intake and rituximab exposure were also risk factors for a more severe COVID-19 infection. These findings will inform risk stratification and management decisions for people with IIM.

Another area where information has been scarce until now is around vaccination safety in children and young people with RMDs, and current vaccination guidance is based on data from

adults with RMDs or young people without RMDs. Ms Saskia Lawson-Tovey presented findings from 36 adolescents with inflammatory RMDs and 74 adults with juvenile idiopathic arthritis (JIA)

Overall, 56% of adolescents and 62% of adults experienced early reactogenic-like side effects within 7 days of vaccination. No adolescents reported SARS-CoV-2 infection post-vaccination, although three women were diagnosed post-vaccination in the adult group, all of whom fully recovered. The authors conclude that COVID-19 vaccines appear safe in adolescents with RMDs and adults with JIA, with a low frequency of disease flares, serious adverse events, and COVID infection seen in both populations. It should be noted that this dataset is limited by its size and does not follow patient outcomes over time, therefore further research is needed in this area.

### **Source**

Machado PM, et al. Characteristics associated with poor COVID-19 outcomes in people with psoriasis and spondyloarthritis: data from the COVID-19 PsoProtect and Global Rheumatology Alliance physician-reported registries. Presented at EULAR 2022; abstract OP0249.

Yeoh S-A, et al. Factors associated with severe COVID-19 outcomes in patients with idiopathic inflammatory myopathy: Results from the COVID-19 Global Rheumatology Alliance physician-reported registry. Presented at EULAR 2022; abstract OP0252.

Lawson-Tovey S, et al. SARS-CoV-2 vaccine safety in adolescents with inflammatory rheumatic and musculoskeletal diseases and adults with juvenile idiopathic arthritis. Presented at EULAR 2022; abstract POS1212.

### **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**

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