



Aim

Each week a brief report will be circulated. The aim is to share information and learning points from clinical cases with COVID-19. Please note these reports are intended for health professionals only and should not be distributed on social media.

Vasculitis COVID-19 cases

Reported

62

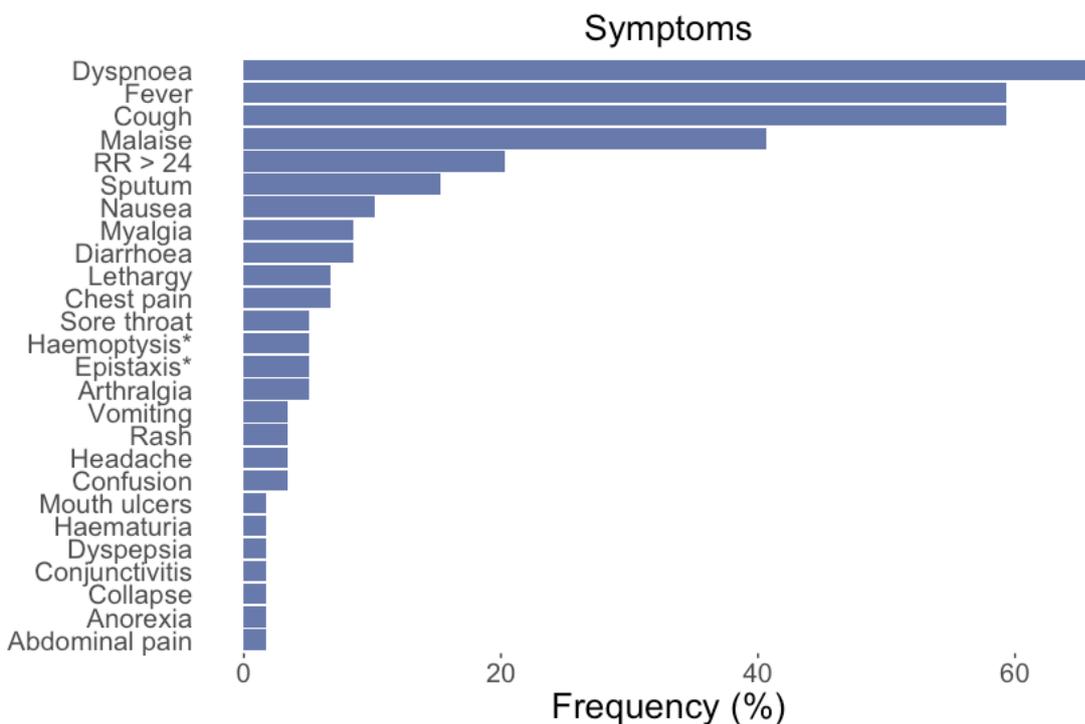
Died

17

How to submit cases

Online case submission is now available via the new COVID-19 module of the UKIVAS web app. If your site is not yet recruiting for UKIVAS, and you would like to set this up, please contact the team at ukivas@ndorms.ox.ac.uk. A paper version of the reporting form is available so sites not yet recruiting for UKIVAS can also submit cases. Please submit paper cases, comments or questions to the UKIVAS COVID-19 group at: gg-uhb.vasculitis-covid@nhs.net.

Symptom frequency



For three patients we do not have information regarding symptoms. Dyspnoea was the most common presenting symptom in 39 of 59 patients (66%). Fever and cough were the next most common symptoms, both in 35 patients (59%).

* Note one individual who experienced haemoptysis and epistaxis was thought to be experiencing a possible flare of vasculitis.



Clinical characteristics of vasculitis patients with COVID-19

Critical Outcome*	No	Yes	Total
	n = 37	n = 25	n = 62
Demographics			
Age, Mean (SD)	64.9 (17.4)	67.6 (12.3)	65.9 (15.6)
Female, n (%)	20 (54.1)	10 (40.0)	30 (48.4)
	17 (45.9)	15 (60.0)	32 (51.6)
Ethnicity, n (%)			
Asian	4 (10.8)	0 (0)	4 (6.6)
Black	1 (2.7)	0 (0)	1 (1.6)
White	24 (64.9)	16 (66.7)	40 (65.6)
Not stated	8 (21.6)	8 (33.3)	16 (26.2)
Smoking status, n (%)			
current	2 (5.4)	1 (4.0)	3 (4.8)
former	6 (16.2)	4 (16.0)	10 (16.1)
never	15 (40.5)	6 (24.0)	21 (33.9)
unknown	14 (37.8)	14 (56.0)	28 (45.2)
Comorbidities, n (%)			
Diabetes	8 (21.6)	5 (20.0)	13 (21.0)
Hypertension	13 (35.1)	13 (52.0)	26 (41.9)
Renal Disease	18 (48.6)	11 (44.0)	29 (46.8)
CV disease	8 (21.6)	8 (32.0)	16 (25.8)
Respiratory disease	5 (13.5)	8 (32.0)	13 (21.0)
Vasculitis diagnosis			
GPA (or PR3 AAV)	10 (27.0)	13 (54.2)	23 (37.7)
MPA (or MPO AAV)	16 (43.2)	5 (20.8)	21 (34.4)
Other	11 (29.7)	6 (25.0)	17 (27.9)
Disease activity			
active	18 (48.6)	11 (44.0)	29 (46.8)
remission	19 (51.4)	14 (56.0)	33 (53.2)

* Critical outcome refers to death, need for invasive or non-invasive ventilation or use of high flow oxygen device



Medication	No	Yes	Total
Critical Outcome*	n = 37	n = 25	n = 62
Current immunosuppressive therapy, n (%)			
Azathioprine	7 (18.9)	6 (24.0)	13 (21.0)
Corticosteroid (any)	21 (56.8)	21 (84.0)	42 (67.7)
Prednisolone 1-5 mg daily	8 (22.9)	9 (36.0)	17 (28.3)
Prednisolone >5mg daily	13 (37.1)	12 (48.0)	25 (41.7)
(Missing corticosteroid dose)	2 (5.4)	0 (0)	2 (3.2)
Cyclophosphamide	3 (8.1)	4 (16.0)	7 (11.3)
Hydroxychloroquine	2 (5.4)	2 (8.0)	4 (6.5)
IVIG	1 (2.7)	0 (0)	1 (1.6)
Mycophenolate	6 (16.2)	5 (20.0)	11 (17.7)
Rituximab	11 (29.7)	8 (32.0)	19 (30.6)
Other medications, n (%)			
ACEI or ARB	11 (29.7)	8 (32.0)	19 (30.6)
NSAID	0 (0)	2 (8.0)	2 (3.2)
(Missing – other medication)	3 (8.1)	1 (4.0)	4 (6.5)

* Critical outcome refers to death, need for invasive or non-invasive ventilation or use of high flow oxygen device

** Or other steroid in prednisolone equivalents

Discussion

In order to merge additional data from Ireland's Rare Kidney Disease (RKD) registry, the upper limit of the 'lower dose' of corticosteroid has changed such that patients on 5mg are now included in the low dose group, not the high dose group. Numerically those on steroids are more frequently in the critical outcome group and this may be more pronounced at higher doses. The sample size currently precludes hypothesis testing, therefore it is unclear if this effect is real.