

SS4. Pulmonology-COVID highlighted session

15:25 - 16:15 Friday, 26th August, 2022

Eszterhazy hall / Eszterházy terem

Track Pulmonology

Presentation type Oral / szóbeli előadás

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Multidisciplinary session: Pulmonology-COVID session

Moderátor: Prof. Dr. Veronika Müller

Zsűritag: Prof. Dr. Veronika Müller, Prof. Dr. Ildikó Horváth, Viktória Dulai, MD, Tamás Kovács, MD

15:25 - 15:35

11 Post-COVID interstitial lung disease in symptomatic patients after hospital discharge

Dorottya Fesu, Lorinc Polivka, Eniko Barczi MD, PhD, Tamas Nagy MD, Gabor Horvath MD, PhD, Aniko Bohacs MD, PhD, Veronika Muller MD, PhD, DSC

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Abstract

POST-COVID INTERSTITIAL LUNG DISEASE IN SYMPTOMATIC PATIENTS AFTER HOSPITAL DISCHARGE

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Keywords: COVID-19, interstitial lung disease, long-COVID, post-COVID

Aims: COVID-19 is often associated with long-lasting pulmonary symptoms. Our aim was to collect and analyze data about interstitial lung disease (ILD) in patients following COVID-19 hospitalization with persistent symptoms.

Methods: We retrospectively reviewed all cases sent to pulmonary post-COVID evaluation due to persistent symptoms between February 2021 and February 2022 (N=318). All patients with suspected ILD (N=44) were reviewed at the MDD. Patient characteristics, symptoms, time since hospitalization, lung function, P_{lmax} and P_E_{max}, and 6-minute walk test (6MWT) were evaluated.

Results: The post-COVID-ILD included more men (male: 68%, age: 64.0±12.3 years, time since hospitalization: 2.4±2.3 months) with overweight (BMI 29.1±4.2 kg/m²). Persisting symptoms included tiredness (30%), dyspnea (20%), cough (20%), sleep disorders (20%), Spirometry confirmed restrictive ventilatory pattern (FVC: 76.7±18.1, FEV₁: 83.5±19.1 TLC: 85.6±28.1 %pred) as well as decreased DLCO (85.0±21.2 % pred), and P_E_{max} (9.1±3.8 kPa). 6MWT did confirm desaturation in 41% of patients. To possibly confirm ILD a follow-up HRCT was done.

Conclusions: Our data indicate that suspected post-COVID ILD is affecting 13.8% of symptomatic patients. Functional impairment, especially decreased diffusion capacity and desaturation during 6MWT are important factors when ILD is suspected. Longitudinal follow-up of these patients is in progress.

Support: The authors have no financial interests.

Categories

Pulmonology

Language of your presentation:

English

10 Remdesivir in solid organ recipients for COVID-19 pneumonia

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Abstract

REMDESIVIR IN SOLID ORGAN RECIPIENTS FOR COVID-19 PNEUMONIA

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Keywords: COVID-19, solid organ transplantation, remdesivir, SARS-CoV-2, lung transplantation

Aims: Treatment of coronavirus disease (COVID)-19 is still challenging, as no proven therapeutic regimen is available for immunocompromised patients, such as solid organ transplant (SOT) recipients. Our aim was to evaluate the efficacy and safety of remdesivir (RDV) therapy in infected hospitalized SOT patients.

Methods: All transplanted recipients (N=25; lung:19; kidney:3, liver:2, heart:1) who needed hospital care were reviewed in the time period between September 2020 and May 2021 out of the 945 patients treated at the Department. Case control matched patients receiving RDV – all in need of supplementary oxygen- and standard of care (SOC) were included as controls.

Results: Among the 25 SOT patients (female:male=11:14; average age=53,2 ±12,7 years) 15 received RDV medication (RDV-TX), while in 10 cases SOC was used (SOC-TX). Significantly worse clinical score was noted in RDV patients compared to RDV-TX, however transfer to higher intensity care unit, as well as 60-day survival of RDV-TX patients, were significantly worse. All SOT fatalities within 60 days of follow-up were lung transplant (LuTx) recipients (6 out of 19 LuTx patients). No adverse events were noted related to RDV therapy.

Conclusions: In SOT patients, especially lung transplant recipients, with severe COVID-19 needing supplementary oxygen, RDV treatment was safe, however outcome was significantly worse as compared to not transplanted individuals with initially worse clinical parameters.

Support: The authors have no financial interests.

Categories

COVID

Language of your presentation:

English