

## **Race made no difference in ICU outcomes of COVID-19 patients, study finds**

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In a study that looked at racial differences in outcomes of COVID-19 patients admitted to the intensive care unit, researchers at Henry Ford Hospital in Detroit found that patients of color had a lower 28-day



mortality than white patients.

Race, however, was not a factor in overall hospital <u>mortality</u>, length of stay in the ICU or in the rate of patients placed on <u>mechanical</u> <u>ventilation</u>, researchers said.

The findings, published in *Critical Care Medicine*, are believed to be one of the first in the United States to study racial differences and outcomes specific to patients hospitalized in the ICU with COVID-19.

Since the start of the pandemic, data have shown that Black and Hispanic populations have higher rates of COVID-19 infections, hospitalizations and mortality. The Henry Ford study found just the opposite.

"What we wanted to look at was once patients are in the ICU, does that same racial disproportion occur. And the answer is no," said Michael Lazar, M.D., a Henry Ford pulmonology and <u>critical care medicine</u> physician and the study's lead author. "The care we deliver is essentially the same and race makes no difference."

Researchers theorized that the 28-day mortality in patients of color could be easily explained: The deaths among patients of color were delayed. Seven of the nine patients who died in the hospital after 28 days were patients of color.

Still, they said their findings reflect more about the level of care provided in the ICU than <u>racial differences</u>.

"What we do in the <u>intensive care</u> is driven by protocol and everyone is approached similarly," said Jeffrey Jennings, M.D., a Henry Ford pulmonology and critical care medicine physician and the study's senior author.



Detroit was one of the cities hardest hit in the first surge of the pandemic. Henry Ford Hospital is the largest of the five acute-care hospitals in the Henry Ford Health System. To date, the health system has treated more than 44,000 patients with COVID-19 and more than 11,000 patients with COVID-19 have been hospitalized.

For the retrospective study, researchers evaluated the <u>electronic medical</u> <u>records</u> of 365 COVID-19 patients 18 and older who were admitted to the ICU between March 13, 2020 and July 31, 2020. The patients were divided into two groups: White and people of color, which included Black, Asian, Hispanic/Latino and Arab populations. Of the 365 patients, 219 were Black, 129 were White, eight were Hispanic/Latino, seven were Arab and two were Asian.

In other demographics, 205 patients were men and 160 women. The people of color group were slightly younger, 62.8 years, compared to the White group, 67.1 years. Co-morbidities ranged from COPD and asthma to hypertension, diabetes and coronary artery disease.

Other key highlights in the study:

- Overall mortality in the two groups was 50%
- Nearly 75% required mechanical ventilation
- While most patients were treated with steroids early in their hospitalization, it was not a significant predictor of mortality

**More information:** Michael H. Lazar et al. Racial Differences in a Detroit, MI, ICU Population of Coronavirus Disease 2019 Patients, *Critical Care Medicine* (2020). DOI: 10.1097/CCM.00000000004735

Provided by Henry Ford Health System



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