

Care disparities seen for COVID-19 patients with, without schizophrenia

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(HealthDay)—There are disparities in health and health care between

hospitalized COVID-19 patients with schizophrenia and without severe mental illness, according to a study published in the May issue of *Schizophrenia Bulletin*.

Guillaume Fond, M.D., Ph.D., from the FondaMental Academic Centers of Expertise for Schizophrenia in Créteil, France, and colleagues examined whether COVID-19 health outcomes and care differed for patients with schizophrenia and patients without a diagnosis of [severe mental illness](#) using data for 50,750 patients with COVID-19 and respiratory symptoms hospitalized in France between February and June 2020, of whom 823 were schizophrenia patients (1.6 percent).

The researchers found that in-hospital mortality was increased among schizophrenia patients versus controls (25.6 versus 21.7 percent; adjusted odds ratio, 1.30), and they had a reduction in the [intensive care unit](#) (ICU) admission rate (23.7 versus 28.4 percent; adjusted odds ratio, 0.75). For mortality and ICU admission, significant interactions were observed between schizophrenia and age. Compared with controls of the same age, schizophrenia patients aged 65 to 80 years had a significantly higher risk of death (+7.89 percent). More ICU admissions were seen for schizophrenia patients aged younger than 55 years (+13.93 percent), while those aged between 65 and 80 years and older than 80 years had fewer ICU admissions compared with controls of the same age (−15.44 and −5.93 percent, respectively).

"These disparities differed according to the age and clinical profile of [schizophrenia](#) patients, suggesting the importance of personalized COVID-19 clinical management and [health care](#) strategies before, during, and after hospitalization for reducing health disparities in this vulnerable population," the authors write.

More information: [Abstract/Full Text](#)

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