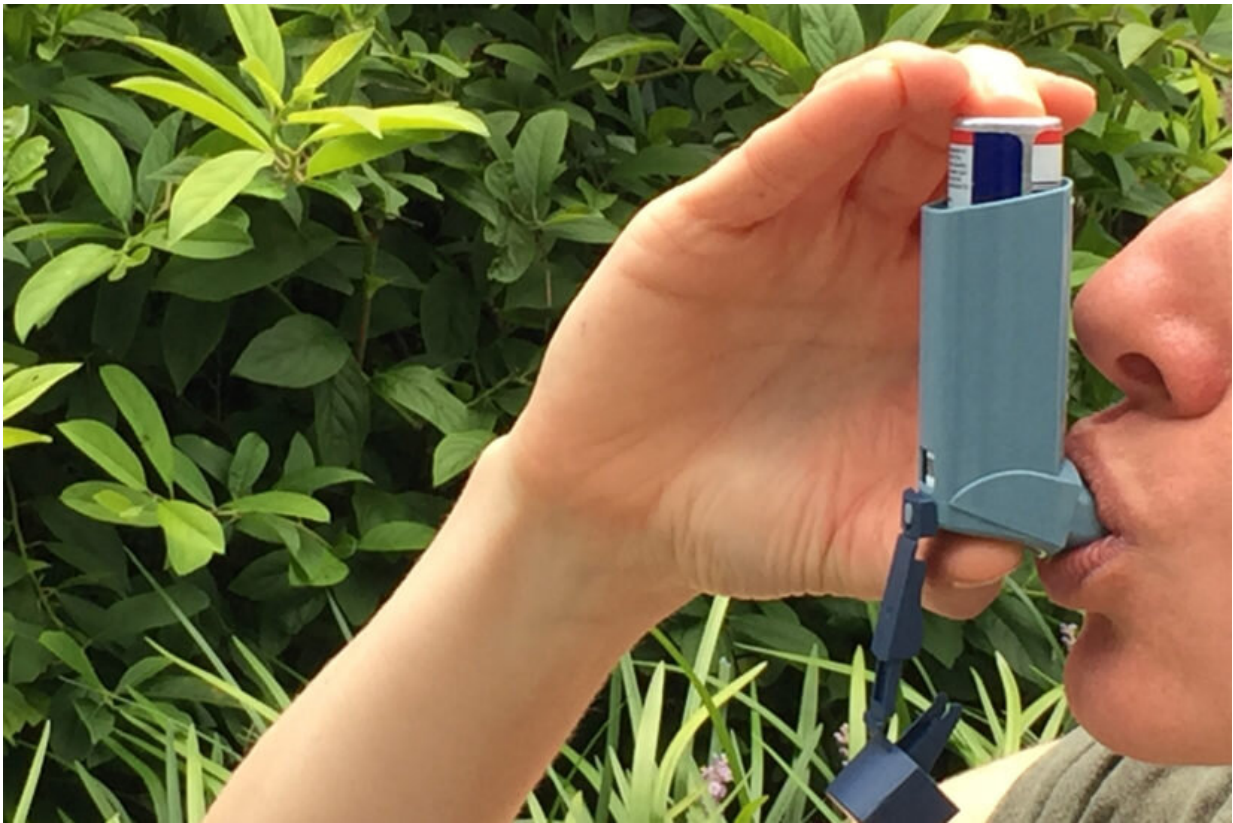


People who manage their asthma can improve their chances against COVID-19

August 10 2021, by Leigh Hopper



Roughly 25 million Americans have asthma, a serious concern as the COVID delta variant continues to spread. Credit: NIAID

Asthmatics who have their illness well under control have less severe COVID-19 outcomes than those with uncontrolled asthma, according to

a large study conducted by USC and Kaiser Permanente Southern California.

The findings, published in *The Journal of Allergy and Clinical Immunology: In Practice*, suggest that asthma patients—especially those who require [clinical care](#)—should continue taking their asthma medications during the COVID-19 pandemic.

"Anyone with asthma should continue to work with their [health care provider](#) to ensure they are getting the [best treatment](#) for their asthma, which leads to better asthma control and decreases the likelihood of severe COVID-19 outcomes," said Zhanghua Chen, co-lead author of the study and an assistant professor of population and public health sciences at the Keck School of Medicine of USC.

Approximately 25 million Americans have asthma, a potentially serious respiratory condition in the face of widespread COVID transmission. The asthma numbers equal about 1 in 13 Americans, including 8% of adults and 7% of children.

The USC/Kaiser Permanente collaboration gave researchers a chance to evaluate the impact of breathing disorders on COVID outcomes in a population with [equal access](#) to health care.

Researchers collected data on 61,338 COVID-19 patients using [electronic medical records](#) from Kaiser Permanente Southern California from March 1 to Aug. 31, 2020. The mean age was 43.9; 54% were women and 66% had Hispanic race/ethnicity.

Medical codes were used to determine if these patients had asthma or chronic obstructive pulmonary disease prior to their COVID-19 diagnosis. Researchers also separated the data further, with the "active" group accounting for any patients who had a clinical visit for asthma

within the last 12 months and the "inactive" group accounting for those who had not.

A total of 2,751 patients were in the inactive asthma group versus 2,775 in the active group. Additionally, 820 patients had a history of COPD. Patients in the active asthma group had significantly higher odds of hospitalization, a need for intensive respiratory support and ICU admission within 30 days of COVID-19 diagnosis compared to those with no history of asthma or COPD.

A history of COPD was associated with a higher risk of hospitalization, need for intensive respiratory support and death within 60 days from COVID-19. Notably, researchers did not see a higher likelihood of mortality within 60 days for the active asthma group.

"This study went beyond examining asthma's impact on COVID-19 outcomes and instead focused on how COVID-19 outcomes might change for [asthma patients](#) depending on their level of asthma control," said study author Anny H. Xiang of the Kaiser Permanente Southern California Department of Research & Evaluation.

"We also saw that even in patients with active asthma, if they were using [asthma medications](#) their odds of worsened COVID-19 outcomes decreased, which demonstrates just how important these medications are."

More information: Brian Z. Huang et al, Asthma Disease Status, COPD, and COVID-19 Severity in a Large Multiethnic Population, *The Journal of Allergy and Clinical Immunology: In Practice* (2021). [DOI: 10.1016/j.jaip.2021.07.030](https://doi.org/10.1016/j.jaip.2021.07.030)

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