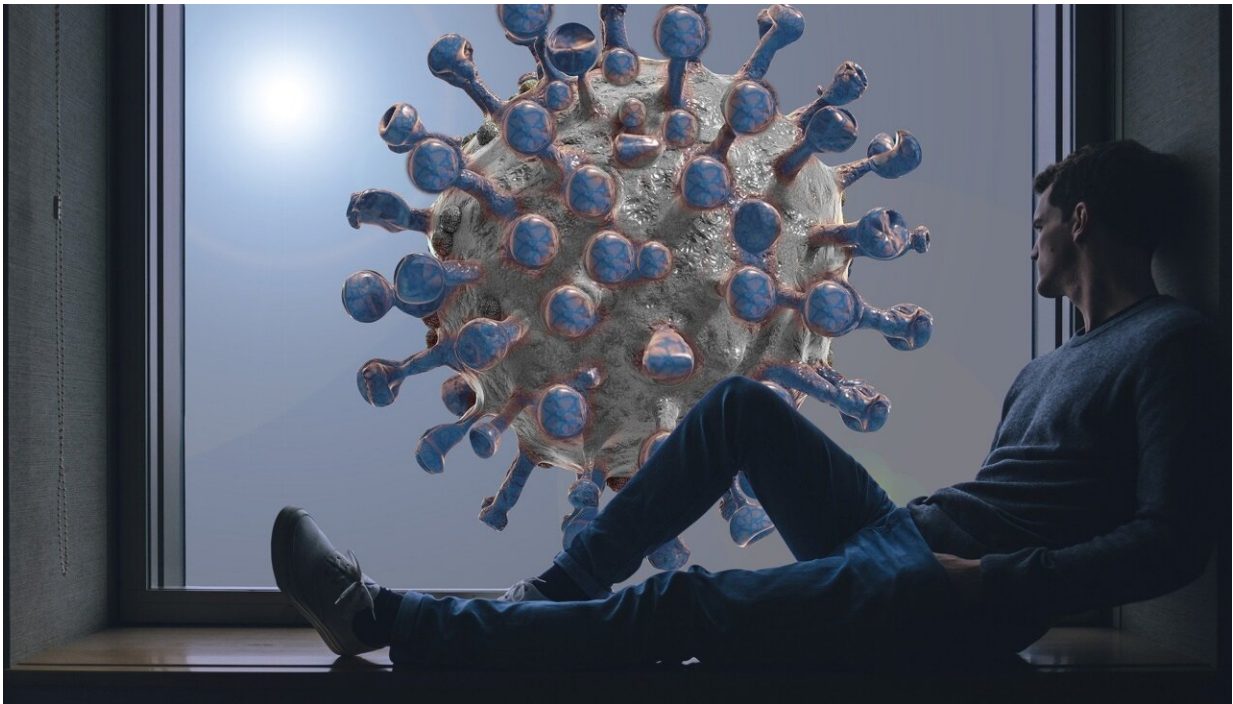


People with schizophrenia five times more likely to die from COVID-19

December 7 2021, by Michael Addelman



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People with psychotic disorders, such as schizophrenia, are five times more likely to die from COVID-19 and three times more likely to be hospitalized according to new research by University of Manchester health data scientists.

The most detailed study to date examining COVID-19 outcomes in people with different diagnoses of [severe mental illness](#) in the UK is published today in the journal *Molecular Psychiatry*.

People with psychotic [disorders](#) showed 4.84 times higher odds of dying from COVID-19, compared to those without severe mental [illness](#). The odds of dying from COVID-19 were 3.76 higher in people with bipolar disorder and 1.99 higher in people with major depressive disorder.

Among people with COVID-19, those with psychotic or bipolar disorders had the highest rates of infection leading to hospitalization: 35.8 percent and 37.3 percent respectively, compared to 16.6 percent among with those without severe mental illness.

And among people with COVID-19 who were hospitalized, over half of those with psychotic disorders—52.6 percent—did not survive compared to 37.5 percent among with those without severe mental illness.

The study was conducted in the UK Biobank, which is a large-scale biomedical database and research resource containing genetic, lifestyle and [health information](#) from half a million UK participants.

UK Biobank's database, which includes [blood samples](#), heart and brain scans and genetic data of the 500,000 volunteer participants, is globally accessible to approved researchers who are undertaking [health](#)-related research that's in the public interest.

Of the individuals included in this study, 1,925 had a recorded history of schizophrenia or other [psychotic disorders](#) in their lifetime, 1,483 had [bipolar disorder](#) and 41,448 had major depressive disorder.

The samples were compared with 402,440 UK Biobank participants with no indicated history of these conditions.

UK Biobank participants were tracked from 31 January 2020, the first COVID-19 related death in the UK, until 28 February the next year.

A total of 16,282 people tested positive for COVID-19, while 2,885 were hospitalized and 1,081 died.

Though UK Biobank participants are now mostly over 65 years of age, and 95 percent white, the authors argue the results still have important implications for public health.

The higher rates of adverse COVID-19 outcomes among people with severe mental illness were partly linked to a range of factors including being male, belonging to an ethnic minority, older age and having certain respiratory and metabolic conditions.

"This is the most comprehensive study yet to examine COVID-19 outcomes in people with different types of severe mental illness in the UK. It shows that people with severe mental illnesses, and particularly psychosis, experience significantly poorer outcomes resulting from COVID-19, which are only partly explained by pre-existing physical health conditions," says Dr. Lamiece Hassan.

However, over half of the excess risk could not be attributed to any of the sociodemographic, clinical or lifestyle factors measured, including a range of pre-existing physical health conditions.

Lead author Dr. Lamiece Hassan from The University of Manchester said: "This is the most comprehensive study yet to examine COVID-19 outcomes in people with different types of severe mental illness in the UK.

"It shows that people with severe mental illnesses, and particularly psychosis, experience significantly poorer outcomes resulting from

COVID-19, which are only partly explained by pre-existing physical health conditions.

Co-author Dr. Brendon Stubbs from Kings College London added: "Engagement and action from all people working in the COVID-19 and physical health area is needed to address these disparities, to adopt a proactive approach to protecting this population in both the short and long-term."

"That could, for example, include providing tailored health interventions for people living with mental illness, increasing access to vaccination programs and/or increasing the availability of screening and treatment for COVID-19, along with other physical health conditions which may worsen the health and social implications from COVID-19 for these underserved populations."

Dr. Joe Firth from The University of Manchester said: "The COVID-19 pandemic has further highlighted the poor physical health outcomes we see for people who experience severe mental illness. Clearly, there is an urgent need to provide enhanced care for this particularly high-risk group."

More information: Lamiece Hassan et al, Disparities in COVID-19 infection, hospitalisation and death in people with schizophrenia, bipolar disorder, and major depressive disorder: a cohort study of the UK Biobank, *Molecular Psychiatry* (2021). [DOI: 10.1038/s41380-021-01344-2](https://doi.org/10.1038/s41380-021-01344-2)

Provided by University of Manchester

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