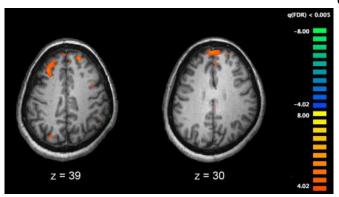


Schizophrenia second only to age as greatest risk factor for COVID-19 death

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Functional magnetic resonance imaging (fMRI) and other brain imaging technologies allow for the study of differences in brain activity in people diagnosed with schizophrenia. The image shows two levels of the brain, with areas that were more active in healthy controls than in schizophrenia patients shown in orange, during an fMRI study of working memory. Credit: Kim J, Matthews NL, Park S./PLoS One.

People with schizophrenia, a mental disorder that affects mood and perception of reality, are almost three times more likely to die from the coronavirus than those without the psychiatric illness, a new study shows. Their higher risk, the investigators say, cannot be explained by other factors that often accompany serious mental health disorders, such as higher rates of heart disease, diabetes, and smoking.

Led by researchers at NYU Grossman School of Medicine, the investigation showed that <u>schizophrenia</u> is by far the biggest risk factor (2.7 times increased odds of dying) after age (being 75 or older increased the odds of dying 35.7 times). Male sex, heart disease, and race ranked next after schizophrenia in order.

"Our findings illustrate that people with schizophrenia are extremely vulnerable to the

effects of COVID-19," says study lead author Katlyn Nemani, MD. "With this newfound understanding, <u>health care providers</u> can better prioritize vaccine distribution, testing, and medical care for this group," adds Nemani, a research assistant professor in the Department of Psychiatry at NYU Langone Health.

The study also showed that people with other mental health problems such as mood or anxiety disorders were not at <u>increased risk</u> of death from coronavirus infection.

Since the beginning of the pandemic, experts have searched for risk factors that make people more likely to succumb to the disease to bolster protective measures and allocate limited resources to people with the greatest need. Although previous studies have linked psychiatric disorders in general to an increased risk of dying from the virus, the relationship between the <u>coronavirus</u> and schizophrenia specifically has remained unclear. A higher risk of mortality was expected among those with schizophrenia, but not at the magnitude the study found, the researchers say.

The new investigation is publishing Jan. 27 in the journal *JAMA Psychiatry*. Researchers believed that other issues such as heart disease, depression, and barriers in getting care were behind the low life expectancy seen in <u>schizophrenia patients</u>, who on average die 15 years earlier than those without the disorder. The results of the new study, however, suggest that there may be something about the biology of schizophrenia itself that is making those who have it more vulnerable to COVID-19 and other viral infections. One likely explanation is an immune system disturbance, possibly tied to the genetics of the disorder, says Nemani.

For the investigation, the research team analyzed 7,348 patient records of men and women treated for COVID-19 at the height of the pandemic in NYU



Langone hospitals in New York City and Long Island between March 3 and May 31, 2020. Of these cases, they identified 14 percent who were diagnosed with schizophrenia, mood disorders, or anxiety. Then, the researchers calculated patient death rates within 45 days of testing positive for the virus.

They note that this large sample of patients who all were infected with the same virus provided a unique opportunity to study the underlying effects of schizophrenia on the body.

"Now that we have a better understanding of the disease, we can more deeply examine what, if any, immune system problems might contribute to the high death rates seen in these patients with schizophrenia," says study senior author Donald Goff, MD. Goff is the Marvin Stern Professor of Psychiatry at NYU Langone.

Goff, also the director of the Nathan S. Kline Institute for Psychiatric Research at NYU Langone, says the study investigators plan to explore whether medications used to treat schizophrenia, such as antipsychotic drugs, may play a role as well.

He cautions that the study authors could only determine the risk for patients with schizophrenia who had access to testing and medical care. Further research is needed, he says, to clarify how dangerous the virus may be for those who lack these resources. Goff is also the vice chair for research in the Department of Psychiatry at NYU Langone.

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