Cystic Fibrosis Research News

Title:
The global impact of SARS-CoV-2 in 181 people with cystic fibrosis

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What was your research question?
We aimed to describe the impact of SARS-CoV-2 infection, known as COVID-19 and coronavirus, in people with cystic fibrosis (CF) through a global collaboration of CF Registries. We report on demographic, clinical and disease-related characteristics in a global group of people diagnosed with SARS-CoV-2 to better understand the severity of infection experienced in the population.

Why is this important?
As SARS-CoV-2 continues to spread around the world, people with CF have been identified as a vulnerable group. It is important for people with CF and their clinical teams to have information on how COVID-19 is affecting them so they can take appropriate actions and provide the best medical care.

What did you do?
A global network of CF Registries collaborated in pulling together anonymised data on people with CF diagnosed with SARS-CoV-2 from 19 countries before 13 June 2020. The data were analysed and summarised in this report, with characteristics in the population being compared against various outcomes including hospitalisation, intensive care admission and death.

What did you find?
The outcomes of SARS-CoV-2 infection in people with CF seem to show a similar range to that in the general population. 11 people in the cohort were admitted to intensive care and 7 died. Our analysis was separated into 32 people who had received an organ transplant and 149 people who had not. Higher proportions of people who had an organ transplant (74%) were admitted to hospital compared with people who have not had a transplant (46%). Similarly, higher proportions of people with lower lung function in the year before to infection were hospitalised. These findings suggest a possible association of these characteristics with more severe outcomes due to SARS-CoV-2.

What does this mean and reasons for caution?
Whilst many people with CF have no or mild symptoms of SARS-CoV-2, this is not a non-threatening infection and can lead to serious health concerns. It is important to remember that this report did not capture all cases of SARS-CoV-2, only those diagnosed through their clinical team. Also, this study reports only on cases recorded before June 2020. Further
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analysis is needed on these new cases to further understand the links between individual characteristics and other CF-related illnesses and severity of outcomes from COVID-19.

What’s next?
We continue to collect data on diagnosed cases of SARS-CoV-2 in people with CF and aim to publish more information in the coming months. In future we will follow up on the medium-to long-term effects of the virus on people with CF, as the long-term impacts of the disease remain unknown.

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