

CLINICAL CHARACTERISTICS AND MORTALITY OF COVID-19 IN A LONG TERM CARE FACILITY

4CPS - 357



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Background and Importance

Older patients living in long-term care facilities (LTCFs) are the most vulnerable population during the pandemic caused by SARS-CoV2
It has been estimated that many as half of all deaths for COVID-19 in Europe occurred in care homes

Aim and Objectives

To describe a coordinated programme in response to a COVID-19 outbreak in a LTCF, the clinical and epidemiological characteristics and the mortality rate

Material and Methods

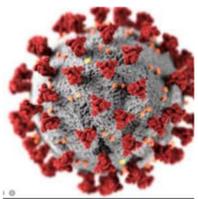
SPAIN

264-bed LTCF

20 March – 30 June 2020

Coordinated programme to avoid high risk of contagion with 12 interventions:

1. Training on infection prevention and control
2. Screening of all staff members for symptoms
3. Communal activities and visits restriction
4. Locating a clean room for equipment
5. Providing personal protective equipment
6. Resident cohorting
7. Assessment of all residents for symptoms and implementation of communication tools with families
8. Strengthening the workforce
9. Provision of equipment, materials and drugs with a minimum of supplies
10. Establishment of a consultation circuit with the local hospital
11. Compliance of protocols
12. Laboratory testing



Demographical, clinical and pharmacological data were retrospectively collected of residents with confirmed SARS-CoV-2 infection: comorbidities, signs and symptoms, outcome (recovery or death), therapy received for COVID-19 and concomitant antibiotic

Results

231 residents

29,4% tested positive for SARS-Cov2

23,4% died



All-cause mortality increased by 228.7% compared with previous 3-years

Charlson comorbidity index age adjusted Median: 6 (IQR: 4.5 – 7)

Hospitalisation Hospitalised: 26.5% -> 68.7% died in the local hospital

Median duration: 12.5 days (IQR: 3.5 – 19)

Symptoms 72.1% -> often typical symptoms (fever, cough or breathlessness)

Treatment 58.8% received any experimental treatment for COVID-19

Antibiotics 52.9% -> increase of 47.2% in consumption compared with the same period of 2019

Conclusion and Relevance

We have detected a considerable mortality associated with COVID-19, highlighting the challenges of the implementation of a coordinated programme to control SARS-CoV2 outbreaks in LTCFs reducing hospital referral rates



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