1128. A single-center study of COVID-19 infection in patients with chronic lymphocytic leukemia.

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Introduction

- In the COVID-19 pandemic, CLL patients are potentially a high-risk population because of intrinsic frailty, immunosuppressive therapies, and frequent hospital visits for treatment delivery.
- In this study, we retrospectively analyzed the pre-infection patient characteristics, COVID-19 clinical symptoms, clinical severity, care setting and outcome in CLL in Department of Hematology of Jiangsu Provincial People's Hospital.

Research Objective

 To survey the vaccination status, CLL status, characteristics and outcomes of COVID-19 infections in CLL patients in Department of Hematology of Jiangsu Provincial People's Hospital in China.

Methods

- Patients enrolled: 343 CLL pts were confirmed with COVID-19 infection during December 2022 to May 2023.
- These patients were investigated by questionnaire and telephone followup.
- including the pre-infection patient characteristics, COVID-19 clinical symptoms, clinical severity, care setting and outcome.

Results

- 343 CLL patients were confirmed with COVID-19 infection during December 2022 to May 2023. Among these patients, median age was 60 years (range 24–87), Of which 19.0% (65/343) were over 70 years old.
- Characteristics for the entire cohort were described in Table 1.

Table 1: Baseline characteristics for the cohort									
Characteristics o	Th	ne difference	anal	veic	of N	hlil			
iex	n								
emale	221	64.4%	C	OVID-19(n=88	s) ar	id Se	ver	9	
Male	122	35.6%	C	OVID-19(n=25	٠. د ۱ : د	foot			
Age, [range]		60[24,87]) II	nect	1011	111	
18-25 years old	1	0.3%	Ta	able2.					
6-50 years old	66	19.2%			_				
51-69 years old	211	61.5%	> A	ge >70 years()	0=0.	015),	, live	er	
:70 years old	65	19.0%	al:	sease (p<0.00	١1١.				
Comorbidities before COVID-19									
io comorbidity	167	48.7%	di	sease (PD, P<	0.00	11) a	nd :	-2	
Lomorbidity	107	31.2%							
comorbidities	47	13.7%	10	ior CLL thera	g)ya	=0.0	16)	were	4
or more comorbidities	22	6.4%		sociated with					
typertension	88	25.7%	as	sociated with	sev	ere (LU۷	וח-ד	9
Diabetes	43	12.5%	in	fection.					
/iral hepatitis type B	31	9.0%	***						
Thronic cardiopathy	21	6.1%	Table 2: The	difference analysis of Mild C	OVID-19	and Sever			tion
Renal impairment	10	2.9%			Mild in	rfection	Severe	infection	p
Chronic pulmonary disease	4	1.2%			(n	38)	(n	255)	
Obesity (BMI230)	9	2.6%			- n	%	n	%	
moking history	50	14.6%	Age						
Other tumor history	14	4.1%	≥ 70 years old		21	23.9%	33	12.9%	0.0
Malignancy status at COVID-19 diagnosis					2.1	23.2%	33	14.574	0.0
Watch-and-wait	120	35.0%		before COVID-19					
OR .	92	26.8%	No comorbiditi	65	128	50.2%	39	44.3%	0.4
PR .	39	11.4%	1 comorbidity		81	31.8%	26	29.5%	
iD .	42	12.2%	2 comorbiditie		32	12.5%	15	17.0%	
20	23	6.7%	3 or more com	orbidities	14	5.5%	8	9.1%	
ines until COVID-19 onset			Diabetes		28	11%	15	17%	0.1
Watch-and-wait	120	35.0%	Hypertension		61	23.9%	27	30.7%	0.2
Lline	140	40.8%	Chronic cardio	nather.	15	5.9%	6	6.8%	0.7
f or more lines	43	12.5%	Chronic pulmo		3	1.2%	1	1.1%	0.9
ast vaccination before COVID-19				nary disease			17		
Vot vaccinated	204	59.5%	Liver disease		14	5.5%	41	19.3%	<0.0
One dose	10	2.9%	Renal impairm	ent	6	2.4%	4	4.5%	0.2
Two doses	45	13.1%	Obesity		8	4.3%	1	1.6%	0.3
Three doses	75	21.9%	Smoking histor	y	35	13.7%	15	17%	0.4
ore doses	4	1.2%	Last vaccinatio	n before COVID-19					
COVID-19 severity			Not vaccinated		146	58.2%	58	66.7%	0.5
Mild infection	255	74.3%	One dose		7	2.8%	3	3.4%	
Severe infection	88	25.7%	Two doses		35	13.9%	10	11.5%	
COVID-19 symptoms at onset			Three doses		59	23.5%	16	18.4%	
leating	260	75.8%	Four doses		4		10	0%	
ulmonary	122	35.6%			4	1.6%	0	0%	
ulmonary + Extrapulmonary	214	62.4%		itus at COVID-19 diagnosis					
xtrapulmonary	106	30.9%	No treatment		97	40.8%	23	29.5%	
symptomatic	23	6.7%	CR		69	29.0%	23	29.5%	
tay during COVID-19 episode			PR		33	13.9%	6	7.7%	
lome	255	74.3%	SD		29	12.2%	13	16.7%	
lospital	88	25.7%	PD		10	4.2%	13	16.7%	<0.0
10	9	2.6%	Lines until COV	00 10t	10	448	13	10.778	NU.0
ow-flow oxygen inhalation	49	14.3%		In-13 ouzet					
Ion-invasive mechanical ventilation	3	0.9%	NO treatment		108	42.4%	27	30.7%	0.01

Results

The proportion of patients with severe COVID-19 infection who had received anti-CD20-based treatments, BTK inhibitors treatments, and Bcl-2 inhibitors treatments within the last 12 months were higher than that of patients with mild COVID-19 infection



Similarly, a significantly higher proportion of patients with severe COVID-19 infection had received anti-CD20-based treatments within the last 6 months and within the last 3 months compared to patients with mild COVID-19 infection (Last 6 months:26.1% vs.9.0%, p<0.001; Last 3 months:19.3% vs.7.1%, p=0.001).

Conclusion

- CLL patients have a low rate of COVID-19 vaccination and a high rate of severe COVID-19 infection.
- High proportion of severe COVID-19 infection were confirmed in patients with active disease, previous multiple lines of therapy, advanced age, and multiple comorbidities and multiple comorbidities.
- In addition, anti-CD20-based treatments within the last 12 months may be a risk factor for exacerbating COVID-19 infection.

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