FACTORS RELATED TO THE DEATHS OF PATIENTS INFECTED WITH COVID-19 IN HOSPITALS ANTANANARIVO FOR CASES OF COVID-19.

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OUTLINE

- Introduction
- Methodology
- Results
- Conclusion

INTRODUCTION

Context

- > 6 621 060 deaths in the world (WHO) [1]
- USA (2 871 606), Europa (2 138 478), AsiaSouth East (802 157)
- > Africa (174 927)
- ➤ Madagascar (1 412)

Aim of study

➤ Determine the factors related to the death of hospitalized patients infected with Covid-19 in the hospitals of Antananarivo

METHODOLOGY (I)

- Study design
 - Cohort historical study
- Study location
 - Multicenter study, **4 sites** (CHU Andohatapenaka, CHU Anosiala, CHUJRB, CHUJRA)
- Study of population
 All patients infected by Covid-19 and hospitalized to the hospitals center for cases of Covid-19

- Period of study

 From Ist January 2021 to Ist December

 2021
- Inclusion criteria

 All patients hospitalized during the period concerned, into the 04 sites, whether they were vaccinated or not.

METHODOLOGY (2)

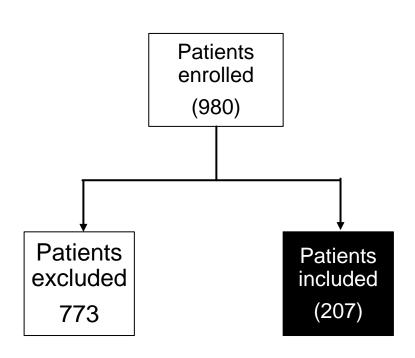
Data collection

- Age, sex
- Comorbidities
- Laboratory findings, and thoracic computed tomography (CT) results, Genexpert
- Treatments, complications
- Time of hospitalization

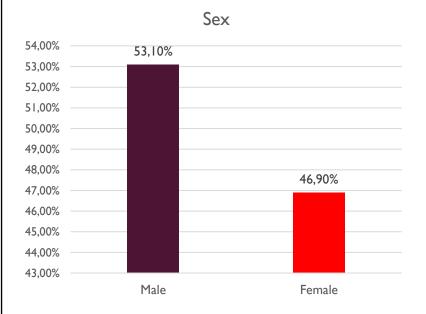
Data statistical analysis

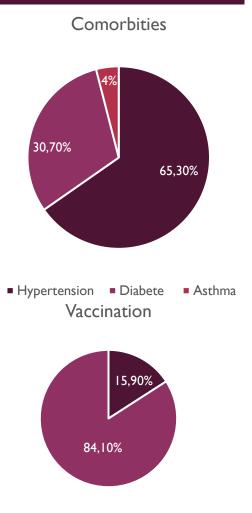
- Stata®14 software, while categorical data are presented as number (%).
- Comparison between 2 variables Risk Ratio (RR) with IC 95% (Confidence Interval)

RESULTS (I)



1. Characteristics of population





■ Vaccinated ■ Non vaccinated

RESULTS (2)

2. Issue of patients

Variables	Survived (n)	Deaths (n)	RR [IC 95%]
Form of Covid 19			
 Moderate 	50	5	1
• Sever	58	40	2.09 [1.24-11.71]
 Critical 	5	49	6.96 [2.66-8.16]
Fever	56	67	3.02 [1.35 -7.39]
Dyspnea	54	80	5.90 [5.54-45.62]).

Variables	Survived (n)	Deaths (n)	RR [IC 95%]
Anemia	61	110	4.00 [1.68-4.31]
Lymphopenia	80	104	3.50 [1.27-8.28]
Leukocyt count	70	102	3.16 [1.31-6.32]
CRP high	87	74	0.94 [0.65-1.36]
D Dimer high	49	103	2.9 [2.74 -4.03]
Complications			
• yes	73	104	2.03 [1.72-2.41]
• no	18	12	1

CONCLUSION

- Many factors associated
- Management, better prognosis and monitoring