



HOSPITAL ADMISSIONS AFTER DISCHARGED FROM EMERGENCIES DEPARTMENT TO HOME WITH COVID-19

Martín Rufo M, Quesada Muñoz L, Díaz Gago A, Delgado-Silveira E, Muñoz García M, Palomar Fernández C, Álvarez Díaz A

Pharmacy Department. Hospital Universitario Ramón y Cajal. Madrid. Spain.

BACKGROUND

During the months of March and April, over 700 patients were discharged from the Emergency Department (ED) in a third-level hospital to home with treatment for COVID-19. Their characteristics and final outcome remain unknown.

BJECTIVES

METHODS

AND

MATERIALS

- To analyze characteristics and clinical course of COVID-19 patients that were discharged from ED with home treatment, having to be hospitalized afterwards due to clinical deterioration.
- To know about the most **prescribed** drugs for COVID-19.
- Observational retrospective study: 1st/March-10th/April 2020.



 Hospitalized patients diagnosed with COVID-19 who had previously come to ED and were discharged to home



VARIABLES:

Demographic	Comorbidities
Fever≥38°C	Tachypnea
COVID-19 treatment	
Reason for consultation and admission	
Days between the 1st and 2nd visit to ED	
Days of hospitalization	
Intensive Care Unit (ICU) stay duration if any	
Reason for discharge	

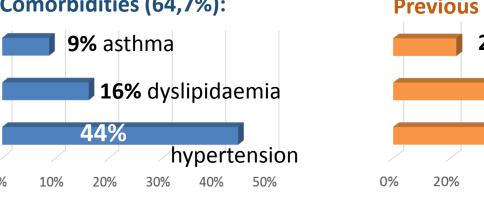
• 741 patients were discharged from ED with home treatment for COVID-19 → 68 (9,2%) needed to be hospitalized

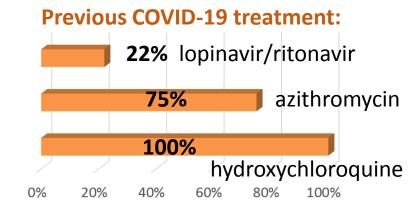
Median age: 55,5 years (IR 22-88, 66.1% men)

Comorbidities (64,7%):

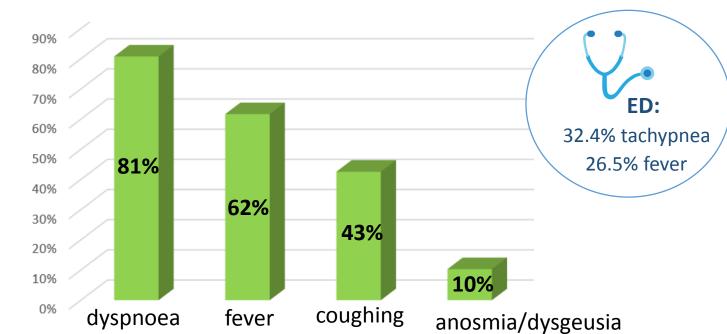
Previous COVID-19 treatment:

22% January Leitanavir





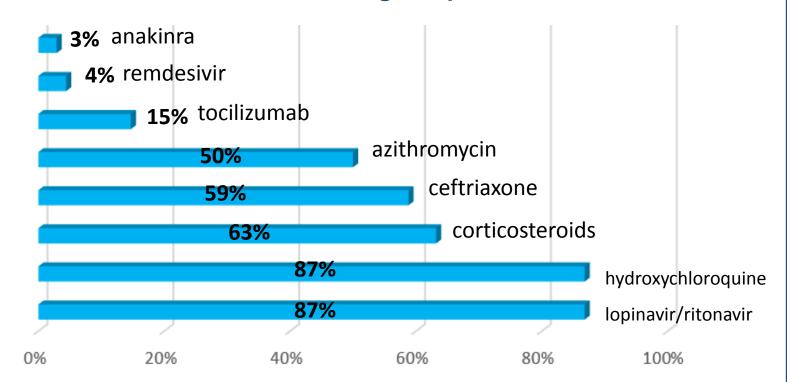
Main consultation reasons:



• Main reason for admission: clinical and radiological worsening (85.3%)

RESULT

- Median of days until patients went back to ED: 4 days
 (± sd)
- Median inpatient stay: 7 days (± sd) and 67.7% were hospitalized for <10 days.
- 8.8% needed critical care, and stayed in ICU for a median of 10.5 days (± sd)
- COVID-19 treatment during hospitalization:



• One patient died and the rest were discharged to home.

CONCLUSION AND RELEVANCE

- Patients who needed hospitalization due to clinical worsening after being discharged from ED were mostly middle-age men with hypertension.
- About 80% were admitted for presenting dyspnea and rapid radiological progression. Less than 10% needed intensive care, and only one passed away. Most of them showed clinical improvement in less than 10 days and were discharged home.
- Drugs mostly prescribed for COVID-19 were hydroxychloroquine, azithromycin and lopinavir/ritonavir.