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**COVID-19 INFECTION IN PATIENTS RECEIVING IMMUNOSUPPRESSIVE THERAPY: EXPERIENCE OF A NORTH AFRICAN NEPHROLOGY CENTER**

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**BACKGROUND AND AIMS:** Since its outbreak in December 2019, novel coronavirus disease 2019 (COVID-19) has become one of physicians top concerns worldwide. Special attention is payed to immunocompromised patients with whom the virus is feared to be more aggressive. Our aim was to assess outcomes in patients receiving immunosuppressive therapy who presented with severe acute respiratory syndrome coronavirus-2 (SARS- CoV-2) infection.

**METHOD:** we monitored patients undergoing immunosuppressive regimens who presented with SARS- CoV-2 infection during a four months period from September to December 2020 in the Nephrology department of Charles Nicolle's Teaching Hospital. The diagnosis was made through nasopharyngeal swabs. Kidney transplant patients were not included.

**RESULTS:** we identified 9 patients who presented a confirmed SARS-CoV-2 infection (details are shown in figure 1). Age varied from 32 to 67 years. Gender ratio was 0,8. Six patients had hypertension and one patient had diabetes. Seven patients suffered from chronic kidney disease stage 4 (2 patients) and stage 5 (5 patients). Active smoking was noted in 4 patients. Indications for immunosuppressive therapy were vasculitis (5patients), lupus nephritis (1 patient), scleroderma (1patient), cryoglobulinemia (1 patient) and multiple myeloma (1 patient). Therapies used included corticosteroids alone (2 patients) or in association with cyclophosphamide (6 patients) and in one case bortezomib. COVID-19 symptoms included fever (6 patients), fatigue (7 patients), joint pain (3 patients), dry cough (all patients) and diarrhea (one patient). Medium duration under immunosuppressive treatment was of 42,1 days when COVID-19 diagnosis was made. Among the patients, six had a mild COVID-19 presentation and displayed favorable outcomes; whereas the remaining three had severe symptoms requiring high dose oxygen and died. As for the renal outcomes, we observed no deterioration of kidney function following the COVID-19 infection in any of the patients. All of the patients were treated with antibiotics, heparin and vitamins.

**CONCLUSION:** SARS- CoV-2 infection is a serious condition that can threaten prognosis especially in patients receiving immunosuppressive drugs responsible for a weaker immune response. Further work on a larger group of patients is necessary to establish whether this group is more prone to contract the COVID-19 infection and have poorer outcomes.