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## Factors associated with hospitalization, ICU use and death among vulnerable populations diagnosed with COVID-19

Project Number Former Number Contact Awardee

3RF1AG063811- 1RF1AG063811- PI/Project Leader Organization

01S2 01 CAI, SHUBING UNIVERSITY OF ROCHESTER



#### **Abstract Text**

Project Summary. As of April 30, 2020, over 1 million individuals in the U.S. have been diagnosed with coronavirus disease 2019 (COVID-19). Patients with COVID-19 may develop various symptoms while the majority of patients have mild symptoms, some require hospitalization, admissions to intensive care unit (ICU), and may die. To date, there is only limited knowledge on risk factors associated with the severity of COVID-19. First, older adults have been found to have higher risks of developing severe symptoms of COVID-19 and are more likely to be hospitalized or die. Studies have suggested that some underlying conditions, such as hypertension, diabetes, or obesity, are associated with the severity of COVID-19. However, it is unknown to what extent these comorbidities explain the variation in the severity of COVID-19, whether older age is independently associated with the severity of COVID-19; and whether and how older age modifies the relationship between comorbidities and the severity of COVID-19. Second, it has been reported that black Americans experienced a higher rate of COVID-related hospitalization and were more likely to die of COVID-19, compared to white Americans. However, it is unknown what may contribute to such racial difference - whether it is due to the differences in health conditions between blacks and whites, or due to the characteristics of the community where they reside in, or due to some other factors that are also associated with race. The objective of this study is to identify individual risk factors that are associated with the severity of COVID-19 (i.e. hospitalizations, ICU use and death), especially among older adults, and to understand reasons that may contribute to racial differences in COVID-19 severity. To achieve these goals, we will use the daily-updated national Veterans Affairs (VA) data, which contain rich individual-level information on veterans diagnosed with COVID-19. As of April 30, 2020, almost 9,000 veterans have been diagnosed with COVID-19, and about 500 had died, thus providing a large study cohort. This proposed study has two Specific Aims:1) To identify individual risk factors that are associated with **COVID**-19 related hospitalizations, ICU use and mortality, to understand the role of older age in COVID-19 severity, and to build a predictive model for COVID-19 severity by machine learning; and 2) To examine reasons for racial differences in illness severity among veterans diagnosed with COVID-19: whether and how such difference is related to individual factors and community characteristics, especially socio-economic status. This study is innovative because it will be the first study to examine the role of multiple risk factors in the severity of COVID-19 by using national data with detailed individual-level information and machine learning algorithm; and it will be the first to examine the reasons, including the role of social determinants, for racial differences in COVID-19 severity. This proposed research is significant as it will help to identify patients with the highest-risk phenotypes, thus providing insights into disease prevention and resource allocation.

#### **Public Health Relevance Statement**

Project Narrative: This proposed research aims to understand risks factors associated with the severity of COVID-19 (i.e. hospitalization, ICU use and death) and the role of older age in the severity of COVID-19; and to examine reasons leading to racial differences in the severity of COVID-19. This proposed research is highly relevant to public health because the findings from this study will help target prevention strategies and allocation of resources to high-risk populations and help fight this novel infectious disease.

#### **NIH Spending Category**

Aging Clinical Research Coronaviruses Emerging Infectious Diseases

Health Disparities Infectious Diseases Minority Health Prevention

Thank you for your feedback!

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Project Number Former Number Contact Awardee

3RF1AG063811- 1RF1AG063811- PI/Project Leader Organization

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COMMUNICO הומחבובס וגובוווומס Diagilusis Goals Health Hospitalization **Hypertension** Individual Ensure Grant **Intensive Care Units Machine Learning** Obesity Knowledge Outcome **Pharmaceutical Preparations Patients Physiological Population** Phenotype **Prevention strategy Public Health** Recording of previous events Race Reporting **Resource Allocation Risk Factors** Role **Severities** Research **Read More** 

## ■ Details

Contact PI/ Project

Leader

Name

CAI, SHUBING

Title

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Other Pls

Not Applicable

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Country

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Department Type
PUBLIC HEALTH & PREV

MEDICINE

Organization Type SCHOOL OF MEDICINE &

DENTISTRY

State Code

NY

**Congressional District** 

25

#### **Other Information**

FOA **PA-18-935** 

**Study Section** 

Award Notice

Date **09-**

Fiscal Year September-2020 September-2020 Administering Institutes or

Centers

NATIONAL INSTITUTE ON

**AGING** 

DUNS Number CFDA Code **041294109 866** 

Project Start

Date

15-July-2019

Project End

Date

Thank you for your feedback!

31-March-2024

Date
Budget Start

September-

2020

15-

Budget End **31-March**-Date **2024** 

## **Project Funding Information for 2020**

NATIONAL INSTITUTE ON AGING

Total Funding Direct Costs Indirect Costs \$578,879 \$376,597 \$202,282

Year Funding IC FY Total Cost b

2020

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**Former Number** Contact 1RF1AG063811-PI/Project Leader **CAI, SHUBING** 

**Awardee** Organization **UNIVERSITY OF ROCHESTER** 



No Sub Projects information available for 3RF1AG063811-01S2

### **Publications**

No Publications available for 3RF1AG063811-01S2

01

## **Patents**

No Patents information available for 3RF1AG063811-01S2

### Outcomes

The Project Outcomes shown here are displayed verbatim as submitted by the Principal Investigator (PI) for this award. Any opinions, findings, and conclusions or recommendations expressed are those of the PI and do not necessarily reflect the views of the National Institutes of Health. NIH has not endorsed the content below.

No Outcomes available for 3RF1AG063811-01S2

### **Clinical Studies**

No Clinical Studies information available for 3RF1AG063811-01S2

## News and More

#### **Related News Releases**

No news release information available for 3RF1AG063811-01S2

## **(**□) History

No Historical information available for 3RF1AG063811-01S2

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# Factors associated with hospitalization, ICU use and death among vulnerable populations diagnosed with COVID-19

Former Number 1RF1AG063811-01

Contact
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UNIVERSITY OF
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